

2017 Lake Sylvania Suzuki Institute Adult Student Registration Form

General Information

Name _____

Address _____

Primary Phone _____

Secondary Phone _____

Email _____

Emergency Contact _____

Relationship _____

Emergency Contact Phone _____

Food Allergies/Preferences _____

Transportation

Are you flying in for camp?	Yes	No	
Airport Ride Needs	From airport only	To airport only	To and from airport
Carpool Needs?	_____		
Please write any additional information here and be as specific as possible:	_____		

Housing

Family or guests attending? You must also complete a Family registration form. Please bring your own linens and bedding. However if you are flying and this would be difficult, we have a very limited supply available on a first-come, first-served basis.

Camp registration is 9:00 am on Wednesday, June 14. Classes begin at 10:00. If you are traveling a large distance and need to arrive at camp on Tuesday afternoon or evening, please notify us and inquire about the fee for early arrival.

Would you like to borrow bedding, if available? _____

Please write any additional information here: _____

Any other special needs we can accommodate? _____

Adult Registration Form, cont.

Fees

Please check all applicable boxes. **Application deadline is April 1st.** All fees non-refundable after April 1. Make checks payable to: Lake Sylvia Suzuki Flute and Recorder Institute.

Registration:	\$75 (Fee per family, non-refundable)
Auditor:	\$30/day (includes lunch) _____ = _____ day x \$30
Tuition:	\$370
Room and board:	\$220
Private lessons:	\$60/hr (30 or 60-minute lessons available) _____ = _____ lessons x \$60
Total enclosed:	_____

Customized shorter stays are available. Contact the registrar at lake.sylvia.flute.camp@gmail.com for adjusted fees.

Liability and Media Release

The following Liability statement must be accepted by all adult participants and by the parent or guardian of participants under the age of 18.

I understand that the Lake Sylvia Suzuki Flute Institute will use reasonable safety precautions, but cannot guarantee the safety of campers. On behalf of myself and any guests or family, I understand, state and agree to hold the institute, its directors, faculty, and employees, harmless from all liability of any kind by reason of any accident, injury or damage, whether to person or property, resulting from my, my guest's, or my family's participation in the camp program.

I hereby grant permission for the Institute's Director or the Director's authorized personnel to obtain medical care on my behalf or my guest's or family's behalf in the event of an emergency. I understand and agree that such action may include, but not be limited to:

- a) Contacting a physician or paramedic;
- b) Admitting the camper to an emergency clinic or hospital;
- c) Engaging the services of ambulance or other emergency vehicle.

I understand and agree that such action will be taken on my behalf or my guest's or family's behalf and that I shall be responsible for all costs and expenses of such emergency treatment.

Signed _____

Adult Registration Form, cont.

The following Media Release statement must be accepted by all adult participants and by the parent or guardian of participants under the age of 18.

I, the undersigned, do hereby consent and agree that Lake Sylvia Flute and Recorder Institute may take and use photographs, videos, and/or digital recordings of me, my family, and/or my guests at Lake Sylvia Flute and Recorder Institute events.

I do hereby release Lake Sylvia Flute and Recorder Institute to exhibit these photographs, videos, digital recordings, and/or their reproductions for any and all media purposes.

I waive any right to inspect or approve the finished photographs, videos, digital recordings, and/or their reproductions that may be used now or in the future.

Please check Yes, No, or Not Applicable in response to the statements below:

I am 18 years of age or older and I am competent to execute these agreements.

Yes

No

I am the parent or legal guardian of the below named child.

Yes

No

N/A

Your Name (please print): _____

Family and Guest names(s) if applicable): _____

Signed: _____

Contact and Mailing Information

Mailing Address for forms/check:

Betty Braunstein, Registrar
805 MacArthur Ave
Ashland, WI 54806

Email Forms to:

lake.sylvia.flute.camp@gmail.com

Registrar Contact Information

Betty Braunstein, (715) 682-3272
lake.sylvia.flute.camp@gmail.com