

2017 Lake Sylvia Suzuki Institute Family Registration Form

Please do not include registered students on this form. All Family forms should be accompanied by a Teacher Trainee, Student, or Adult form.

General Information

Family Members/Guests _____

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:

Family Registration Form, cont.

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? _____

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.

Room and Board:

\$220 (Ages 7 and up)

_____ = _____ x \$220

\$90 (Ages 5 – 6)

_____ = _____ x \$90

Free (Ages 0-4)

Art Class:

\$15 (Ages 0-18)

_____ = _____ x \$15

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.

Family Registration Form, cont.

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 _____

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

I do hereby release Lake Sylvania 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