

Navarro River String Camp - Winter Weekend Workshop

Friday February 26 – Sunday February 28, 2010

To reserve your spot, please send completed application and payment in full to

Navarro River Music, P.O. Box 366 Mendocino CA 95460

Please make check payable to Navarro River Music.

Register by December 8th for Early Bird Discount!

Registration deadline: January 8th , 2010

Name _____ Instrument _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

If this is your first time coming to camp, how did you hear about NRSC? (please circle)

Friend / Teacher / Website / Strings Magazine / Music for the Love of It / Other _____

Age group (please circle): 20 - 40 / 40 - 60 / 60 and over

1) Tuition + 3 meals (Fri/Sat din., Sun lunch):

_____ Early Bird Discount! Register by 12/8: \$230

_____ Register 12/8 - 1/8: \$280

2) Accommodations (visit www.WellspringRenewal.org for further information):

a. Lodges and Housekeeping Cabins (Lodges have several bedrooms, bathrooms, and kitchen; housekeeping cabins are studios with bathroom and kitchen.):

_____ \$94 per person for 2 nights, based on double occupancy

_____ \$134 for 2 nights, single occupancy (subject to availability)

_____ **b. Rustic Cabins** \$60 per person for 2 nights (two room sleeping cabins, several beds, separate bath-house a short walk away, kitchen facilities in main dining room)

Please indicate if there is someone with whom you would like to share a room in the

lodges/cabins: _____

_____ **c.** Will be staying off campus.

3) Non-participating spouse: Accom. fee above + \$75 meals/activities _____

4) Optional: Coffee all day - total for the weekend \$5 _____

Total fee 1 + 2 + 3 + 4 = \$ _____ (please read & complete back side)

Any Dietary Restrictions the Wellspring Kitchen should know about?

New campers, to help us place you in a group, please let us know about the following:

Returning campers: please keep us posted on any updates:

(use a separate piece of paper)

1. How long have you been playing?
2. What are you currently working on (exercise books, pieces etc.)?
3. Do you currently play in any groups or ensembles? If so, please describe.
4. For cellists and violists, what clefs do you read?
5. What are your hopes and goals for string camp?
6. If a chamber group you play in away from camp is attending, please indicate if you would like one of your chamber groups to be this ensemble and list group members.
7. Please include any other pertinent information.

Name of string teacher _____

Teacher's E-mail _____ Teacher's Phone _____

If you have any questions about whether this camp is right for you, please contact Marcia Sloane at pizzicato@pacific.net or 707.937.3342.

Navarro River String Camp accepts applications on a first come first served basis, but reserves the right to make decisions based on instrument and skill level.

Cancellation Policy: No tuition refund after January 8th; Lodging/meal refund until February 1st. No refunds after February 1st. If you need to leave during the course of the camp due to illness or any other reason, fees cannot be refunded.

WAIVER OF LIABILITY:

I hereby authorize the staff of Navarro River String Camp ("the Camp") to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive any claim that I may have against the Camp as a result of any activities that I participate in while at camp whether they are activities of the Camp or not. I release the Camp from any and all liability for any injuries of any kind, including but not limited to personal injuries, incurred while at camp, and release the Camp for any and all liability as a result of any lost or stolen property and for any illness that may occur while at the Camp. I have no knowledge of any physical impairment that would be affected by my participation in the camp program as outlined on the Navarro River Music website. By submitting this application, I also state that I am covered by my personal medical insurance policy. I have read, understand, and accept the terms of this waiver of liability form and further acknowledge that no oral representations concerning this document have been made to me as an inducement to signing this document. I agree to the financial arrangements stated above, and I have answered all the above questions on the application form to the best of my ability and believe my answers are true and correct.

Applicant Signature: _____ Date: _____

Emergency Contact: _____

Phone: _____ cell: _____