

# West Coast Summer Music Camp Application

(Form also available at [www.wcams.com](http://www.wcams.com))

Name (List all applicants)	M/F	Date of Birth DD-MMM-YY	Instrument(s)	Level†	Voice
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

† Level: 1 = beginner, 2 = intermediate, 3 = advanced, 4 = professional

Address \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

WCAMS membership to June 30, 2010 (*Adult \$30, Child/Student/Senior \$15, Family \$50.*) .....\$ \_\_\_\_\_

Non-members attending Camp pay a non-refundable Administration Fee of \$30 per person.

Adults: \_\_\_\_\_ x \$775\* (resident) or \$575 (day) .....\$ \_\_\_\_\_

(\* Adults registering before May 1, 2009 qualify for the Early Bird rate of \$750.)

Students (11-25): \_\_\_\_\_ x \$600 (resident) or \$450 (day) .....\$ \_\_\_\_\_

Children (6-10): \_\_\_\_\_ x \$400 (resident) or \$325 (day) .....\$ \_\_\_\_\_

*D'YUgY' bchY'h Uh'WV] XfYb'i bXYf' gJl 'UHhYbX'k Jh\ci h'WUUF[ Yz'Vi h'h YfY]g'bc' d'fc[ fUa 'Zcf' h' Ya "'*

Private room, \$125 extra .....\$ \_\_\_\_\_

Scholarship Fund donation (tax-deductible) .....\$ \_\_\_\_\_

\$100 discount for a family of three or more which includes school-aged children .....\$ \_\_\_\_\_

TOTAL PAYABLE .....\$ \_\_\_\_\_

A non-refundable deposit of \$100 per person is required with registration; the balance is due by June 20, 2009.

No refunds can be issued after this date. Please register early, as space is limited.

Deposit paid.....\$ \_\_\_\_\_

Balance .....\$ \_\_\_\_\_

*Payments received after June 20, 2009 are subject to a 15% surcharge,  
as WCAMS must guarantee numbers to Trinity Western University.*

Please make cheque payable to WCAMS and send to:

West Coast Summer Music Camp  
c/o 2846 West 12<sup>th</sup> Avenue  
Vancouver, BC V6K 2P9

Fees are to be paid in Canadian dollars.

As a service to its members, WCAMS provides a contact list to all camp participants.

Please check this box if you DO NOT want your name, phone number and postal address to be included in the camp booklet.

Please check this box if you DO NOT want your e-mail address to be included in the camp booklet.

WCAMS publicity often includes photographs taken at camp. Please check this box if you DO NOT want your photograph used.

Preferred roommate \_\_\_\_\_

Designated chaperone \_\_\_\_\_  
(if under 19)

This will be my first time at this camp.

Physical limitations regarding accommodation:

\_\_\_\_\_  
\_\_\_\_\_

I will need a ride.

I can help with transportation.

I would like to be part of a chamber music group. (only one group is guaranteed)

*The West Coast Amateur Musicians Society, the West Coast Summer Music Camp and Trinity Western University accept no responsibility for illness, injury, death, or loss of or damage to personal property during the camp.*