



SAN DIEGO SUMMER MUSIC INSTITUTE



SAN DIEGO SUMMER MUSIC INSTITUTE **Member Application Packet**

Presented by

San Diego State University Bands

and

San Diego Winds



SAN DIEGO SUMMER MUSIC INSTITUTE



April 2, 2010

Dear Prospective San Diego Summer Music Institute Participant,

On behalf of the board of directors of the San Diego Winds and the music faculty of San Diego State University welcome and we hope you are excited about the opportunities that await you this summer. The San Diego Summer Music Institute was formed in recognition of the number of dedicated music students and flourishing school music programs in San Diego County and the lack of summer camps available in town. We wanted to create a unique and powerful musical experience that brings together motivated students and the county's elite teachers and musicians for an explosive week of music making. We know that by the time you complete your week of intensive instruction you will be inspired and dedicated to furthering your musical achievements in the year to come.

Enclosed you will find several forms which we ask you to fill out and mail back to us including the application form, scholarship form (optional) and payment form. Once your application is received we will send you a participant packet which will include information about your week at the Summer Music Institute including a detailed itinerary, campus map and information, as well as general information for the week. Should you have any questions at any time please do not hesitate to email info@sdwinds.org

Sincerely,

Russ Sperling
President, Board of Directors
San Diego Winds

Shannon Kitelinger
Director of Bands
San Diego State University



SAN DIEGO SUMMER MUSIC INSTITUTE



SAN DIEGO SUMMER MUSIC INSTITUTE APPLICATION FORM 2010 July 18-24, 2010

San Diego Summer Music Institute is open to musicians from grades 7 to 12. Selection for participation in SDSMI will be based upon receipt of payment, available seats per instrument and musical proficiency. Placement auditions on Sunday July 18th are solely for chair placement.

Participant Information

First Name _____ Last Name _____
Email Address _____ Address _____
City _____ State _____ Zip _____
Gender M F Date of Birth (MM/DD/YYYY) _____ Grade (2009-10) _____

Parent Information

Parent's Name _____ Parent's email Address _____
Parent's Day Phone _____ Parent's Cell _____

Musical Experience

Name of Current School _____
School Music Teacher Name _____
School Music Teacher email _____
School City _____ School State _____
Private Teacher Name _____
Private Teacher Address _____
Private Teacher City, State, Zip _____

Instrument

Flute Oboe Bassoon Clarinet Bass Clarinet Alto Sax Tenor Sax
 Baritone Sax Cornet / Trumpet French Horn Trombone Tuba
 Percussion Euphonium / Baritone (Treble or Bass Clef) String Bass

Number of Years on Instrument

Please indicate the number of years studied in each of the following areas:

Music School Instruction _____ Private Music Instruction _____

Please indicate other instruments played (if any) _____

Auditions will be held on Sunday July 18th from 2 p.m. - 6 p.m.

If you have a preferred time please indicate that here _____



SAN DIEGO SUMMER MUSIC INSTITUTE



SAN DIEGO SUMMER MUSIC INSTITUTE Scholarship Application

First Name _____

Last Name _____

Email Address _____

Thanks to the generous donors to the San Diego Winds a limited number of scholarships if available in each of the following areas; High Demand Instrument, Exceptional Achievement, and Financial Hardship. Please answer the questions below for each section for which you qualify.

High Demand Instrument

Please check any of the following instruments that you play:

- Contra Bass Clarinet
 Bassoon
 Oboe
 Tuba
 Piano
 Bari Sax
 String Bass

Exceptional Achievement

Please list any honor bands you have been a member of below.

Are you now taking private lessons? yes no

If yes, how long? _____ If no, have you ever taken lessons? yes no

List any solo literature performed:

Are you planning on attending college as a music major? yes no

List any musical references such as band directors, private teachers, etc.

Name: _____ Phone Number: _____ Email: _____

Name: _____ Phone Number: _____ Email: _____

Name: _____ Phone Number: _____ Email: _____



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SAN DIEGO SUMMER MUSIC INSTITUTE Scholarship Application Continued

Financial Hardship

Are you interested in attending the San Diego Summer Music Institute but are unable to afford some or all of the tuition? yes no

If you answered yes above, approximately how much help would you need (tuition is \$300)?

25% 50% 75% 100%

Has your family suffered an economic hardship that would prevent you from covering the cost of tuition such as the loss of a job, sickness in the family, etc. If so please explain below (may require documentation).

Do you qualify for free or reduced lunches at school? yes no

Please list your family's total household gross income for 2009 _____

Please tell us any other information you would like us to consider.



SAN DIEGO SUMMER MUSIC INSTITUTE



SAN DIEGO SUMMER MUSIC INSTITUTE PAYMENT FORM 2010 July 18-24, 2010

Participant Information

First Name _____

Last Name _____

Scholarship/Grant Information

Were you a member of either the CBDA All State Honor Band or the SCSBOA All Southern Honor Band? yes no

Did you receive a superior rating at a SCSBOA Solo and Ensemble Festival this school year? yes no

Students who answer yes to either of the questions above are eligible for a 10% discount off Tuition. If a student answered yes to both questions they are eligible for only one discount.

If you are receiving a scholarship from an outside organization such as your high school band boosters, a family member or company, please list their information below.

Scholarship Granting Individual or Organization _____

Scholarship Amount: \$ _____

Address _____

City _____ State _____ Zip _____

Phone _____



SAN DIEGO SUMMER MUSIC INSTITUTE



Payment Information

A non-refundable Tuition deposit of \$100 is REQUIRED with this form.

Total Tuition	\$300
Honor Band Discount	
OR Solo/Ensemble Festival Discount	- \$30
Outside Scholarship	- \$_____
Total Tuition	_____
Deposit due with Application	\$100
Balance due by June 15th	_____

Checks should be made out to: "San Diego Winds"

- Check or money order enclosed
- American Express Discover Mastercard Visa

Charge my credit card this amount immediately: \$ _____

Print Name on Card _____

Credit Card No. _____

Expiration Date _____

Billing Zip Code _____

Three Digit Security Code _____

Signature of Card Holder _____

Please charge this credit card for the remaining balance on June 15

Student selection will commence on June 20, 2010. **Please be sure your payment is received by us by June 15, 2010.**

Mail Payment to:
San Diego Winds
5694 Mission Center Road, #289
San Diego, CA 92108



SAN DIEGO SUMMER MUSIC INSTITUTE



Photo/Video/Audio Consent

I, the undersigned parent or guardian, consent to the recording and any use by the Board of Trustees of San Diego State University or San Diego Winds of the name, image, musical performance and of the minor child described herein, in (1) photograph, video recording and / or audio recording of this minor child while at the Summer Music Institute described herein; and (2) and photograph , video and/pr audio recording, CD, DVD, tape, webcast, podcast or other medium for distribution produced either in whole or in part from the photograph, video recording and/or audio recording described herein: for any purpose including, but not limited to , teaching, research, public service, fundraising, sale to the public, advertising or publicity on behalf of the University / San Diego Winds or its assigns and licensees, including its Foundation or Alumni Association.

I warrant that I am the parent or legal guardian of the minor described herein and have the full right and authority to grant this consent on behalf of such minor.

I recognize that the University and San Diego Winds will need to conduct its own copy-right clearance review with respect to the underlying music present in such video and/or audio recordings.

In addition, I waive all claims to compensation (including royalties) or damages based on the use of such minor's name, image, musical performance, but the University / San Diego Winds or its assigns and licensees. I also waive any right to inspect or approve the finished photograph, video recording and/or audio recording.

I understand that this consent is perpetual, that I may not revoke it, and that it is binding on the minor and the minor's heirs and assigns. I warrant that I am at least 18 years of age and that I am competent in my own name insofar as this consent is concerned. I further attest that I have read this consent form and fully understand its contents.

X _____ Date _____
Parent or Legal Guardian Signature

Required Signatures

By signing this for, I agree to all terms and conditions of the institute as published in the San Diego Winds Web site (located at www.sdwinds.org) and will be responsible for payment in full, or the difference between the total amount due and any authorized scholarship/grant. I also agree to inform this Summer Music Institute applicant of the expectations listed in the San Diego Winds Web sit for the program.

X _____ Date _____
Parent or Guardian Signature accepting the above conditions