## **2020 McKendree University Junior High Concert Band Camp**June 1 - 4, 2020 or July 13 - 16, 2020

Participant Name:							
Participant Instrumen	t:						
Current Year in School (2019-2020 Year): 5 <sup>th</sup>			6 <sup>th</sup>	$7^{th}$	8 <sup>th</sup>		
Name of School:							
T-Shirt Size (circle):	Youth Medium	Youth	Large				
Adult Small	Adult Medium	Adult	Large	Adu	lt XL	Adult XX	ïL
Name of Parent/Guar	dian:						
Parent/Guardian Con	tact Phone:						
Please note this en Emergency Contact N Emergency Contact N The total cost of the capplication to secure Dr. Moder-Bell (jame McKendree University By signing this docur allowed to leave for castudent appears in for conditions on the bac camp outlined at: http	nail address will be used Name & Phone #1: Name & Phone #2: camp is \$200. A \$50 m a spot in the camp. A oder-bell@mckendree. ty – band camp in the ment, you agree your s other camps, appointment publicity reasons, you k of this form, and have os://www.mckendree.events/jr-high-concert-b	non-refulimited edu) for memo. tudent vents, etcu have cove read	indable number more i will atte c.), you locumer (and agridemics/i	depositer of school of 100 agree to teed an nfo/col	must be a must b	e submitted vos are available checks per camp (they e the photos al or special s and regulati	with this ble – email payable to will not be your needs ions of
sciences/arts/music/e	vents/j1-mgn-concert-t	<u>Janu-Ca</u>	<u>ութ.եուե</u>	•			
Signature of Participant			Da	ate			
Signature of Parent/C		ease ma		ate			
	Dr Jenn	ifer A	Moder_	Rell			

Dr. Jennifer A. Moder-Bell 315 W. Schuetz St. ~ Lebanon, IL 62254