"ROAR" SUMMER BAND CAMP

ACKNOWLEDGEMENT CONSENT & MEDICAL RELEASE FORM

I* . Sect	ion *	acknowledge my participation the "ROAR" Summer
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This document offers a description of	Sin atota tuina?? that "annua	as atoff come coversloss and shareness? vvill
This document offers a description of "in-state trips" that "campers, staff, camp counselors, and chaperones" will participate in and serve as a certification of student acknowledgement and a release and waiver of liability against "ROAR" Summer Band Camp, Florida Memorial University, and the FMU Department of University Bands beyond that which is applicable. Please read before signing.		
The local, and in-state trips of the "ROAR" Summer Band Camp will be defined as the following:		
One-day off-campus local excursions not requiring overnight stay (see below for details)		
End-of-camp performances within the state not requiring overnight stay (see below for details) Polynomials Statement of the state		
Release Statements:		
I understand that the "ROAR" Summer Band Camp or Florida Memorial University (FMU) where the camp is housed, and its faculty and staff are not responsible for any injury, loss, damage, delay, irregularity, or expense arising from matters beyond their control. I waive and release all claims against "ROAR" Summer Band Camp, FMU and the Department of University Bands faculty, and staff that arise at a time when I am not under the direct supervision of the camp or that are caused by my failure to remain under the supervision or to comply with the rules, standards, and instructions outlined by the "ROAR" Summer Band Camp Staff, and Camp Counselors.		
attempts will be made to contact the	emergency contact via the ion problems develop, and	cal emergency requiring attention beyond first aid, all e numbers listed below. However, in circumstances d a student's life is threatened by lack of medical
I, as the emergency contact, do hereby	give my consent for the add	ional and according to the procedures described above, ministration of medical treatment, including dental, sary to secure health and safety of this "ROAR"
Emergency Contact (First Last) *		(Email)*
Relationship*	_	
Emergency Contact (First Last)		(Email)
Relationship	-	
Cell Phone*	(Home)	(Work)
Family Doctor:	Medical Ins. Carrier: _	Policy/Card #:
List ANY Medical Conditions/Allergies:		
Medications currently taking:		DATE *
PARENT/GUARDIAN SIGNATURE*DA		DATE *

*Denotes required field

Incomplete forms will be returned to student to be completed and may result in exclusion from some camp activities.

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IMPORTANT DATES SUMMER BAND CAMP 2021 PLEASE MAKE A NOTE OF THESE DATES ON YOUR HOME CALENDAR

SUMMER BAND CAMP 2021 ACTIVITIES AND PERFORMANCE SCHEDULE

- Friday July 16
 - Event: Crandon Park Beach
 - o Time: 12pm-6pm
 - Address: 6747 Crandon Blvd, Key Biscayne, FL 33149 (NO CAMPER WILL BE PERMITTED IN THE WATER)
 - o Location Contact: (305) 361-5421
- Saturday July 17
 - o Event: Naples Golf
 - o Time: 10am-3pm
 - o Address: TBA
 - o Location Contact: TBA

ADDITIONAL PERFORMANCES AND EVENTS

- ❖ Saturday July 10
 - o Event: Virtual Camp Orientation
 - o Time: 4pm
 - o Address: ZOOM link provided on the camp website
 - o Location Contact (online): theroarmarchingband.com
- ❖ Thursday July 15
 - o Event: "ROAR" Camp Concert (FREE AND OPEN TO PUBLIC)
 - o Time: 6pm-9pm
 - Address: Lou Rawls Auditorium, 15800 NW 42nd Ave, Miami Gardens, FL 33054
 - o Location Contact: (305) 626-3600 Band Office: (305) 626-3684
- ❖ Saturday July 17
 - Event(s): Camp Field Performance/Final Camp Performance
 - o Time(s): 3pm-4pm/4pm-6pm
 - o Address: "The Serengeti", 15800 NW 42nd Ave, Miami Gardens, FL 33054
 - o Location Contact: (305) 626-3600 Band Office: (305) 626-3684

*NOTE: All events are pending University approval. Additional events, activities and performances may occur due to future bookings of the camp band. Dates and times are subject to change, postpone, or cancel.