

**2017 GIRLS ROCK ROANOKE CAMP
APPLICATION**

Camper Name: _____

Date of Birth: _____

1. Contact Information

Name of Camper _____

Camper's Date of Birth _____ Camper's Age at time of Camp _____

Camper's Grade (Fall 2017) _____ Camper's School _____

Camper's Preferred Badge Name or Nickname _____

Camper's T-shirt size - Circle: Adult or Youth

(for their 2017 camp shirt) S M L XL XXL other _____

Parent/Guardian's Name _____

Home Phone (with area code) _____

Cell Phone (with area code) _____

Work Phone (with area code) _____

Home Address _____

City _____ State _____ Zip _____

Mailing Address (if different from above) _____

City _____ State _____ Zip _____

Email _____

**We prefer to use email for communication. If you do NOT have an email account, please tell us the best way to get in touch with you:*

2. Emergency Contacts

Contact Name 1 _____

Relationship to Camper _____

Home Phone (with area code) _____

Cell Phone (with area code) _____

Work Phone (with area code) _____

Contact Name 2 _____

Relationship to Camper _____

Home Phone (with area code) _____

Cell Phone (with area code) _____

Work Phone (with area code) _____

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3. Will your camper be able to attend the Final Showcase at 7:00pm on the last day of camp? *Camp week includes performance at the Final Showcase.*

_____ **YES**

_____ **NO**

4. Does the camper have any allergies or medical considerations? *Please let us know of any accommodations the camper may need.*

5. Insurance Information

Provider: _____ Insurance Number: _____

Camper's Physician: _____ Physician's Phone: _____

6. Does the camper have any special needs? *If yes, please explain and include different abilities and sensory or behavioral considerations.*

7. Optional : In order to be as inclusive as possible and to better serve our diverse community, we are collecting demographic information.

(Note: Girls Rock Roanoke does not discriminate based on race, ethnicity, abilities, gender expression, sexual identity, creed, religion, citizenship, or national origin.)

My camper identifies as (check as many as apply):

____ African American

____ Asian American

____ Bi/Multi-Racial

____ Caucasian

____ Native American or Alaskan Native

____ Native Hawaiian or Pacific Islander

____ Latina

Or specify here: _____

8. Camper's Choice of Instrument *(please mark '1' next to first choice, '2' next to second choice, etc...):*

____ Guitar ____ Keyboards ____ Drums ____ Bass ____ Vocals ____ Ukulele

____ Other (Please specify. You may need to provide this instrument.)

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9. Please indicate any instruments or equipment you are able to bring to camp (e.g., amplifier, cords, etc.) *Note: the ability to bring your own equipment to camp does not factor into a camper's acceptance.*

10. What is your experience, if any, with musical instruments or singing?
(Prospective campers, please answer)

11. What are your favorite bands and musicians? *(Prospective campers, please answer)*

12. Have you attended Girls Rock Camp before? If so, when & where?

13. Express Yourself - On a Separate Sheet of Paper: Why do you want to attend Girls Rock Camp? What does music mean to you? *(Prospective Campers please answer.) We want to know who you are and anything you'd like us to know. There are countless ways to express these things – write a song, a poem, a story, a letter, make a collage or video, draw a picture, take pictures, anything that can fit on one 8 ½ x 11 size page or on a CD. Please mail it in with your application or email files, links, etc. to us. Please understand that this Express Yourself piece may not be returned to you, so send us something we can keep. Make sure that your name and date of birth is visible on the piece so we know YOU made it!*

14. How did you hear about Girls Rock Roanoke?

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15. Campers are expected to bring their own lunch to camp. Please indicate here if you are unable to provide a daily lunch for your camper.

16. Optional: Will you be requesting financial aid for your camper? (Did your camper qualify for free/reduced lunch this year? Is there any other circumstances you would like us to be aware of? *Girls Rock Roanoke does not discriminate and does not make public/share our financial aid decisions or information received.*)

17. Optional: Will you need assistance with transportation to and from camp? (more details will be discussed if this service is needed)

18. Optional: Would you like to donate food for our volunteers and/or campers? *Our camp is operated by hard-working volunteer mentors. We graciously accept donations of food and drinks for breakfasts, snacks, and lunches so that we can keep our volunteers and campers fed throughout the day. Please indicate if you would like to donate a meal, snack, or beverage. Thanks for keeping us energized!*

19. Optional: Would you like to make a tax-deductible donation towards the 2017 scholarship fund to help send a girl to Girls Rock camp? *We rely on our generous donors to help us provide the rock camp experience to girls who might otherwise not be able to attend. Please indicate the amount of your donation and enclose a check made out to Girls Rock Roanoke or make a donation via PayPal on our website, www.girlsrockroanoke.com. Thank you for your support!*

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I attest that the above information is true and accurate:

Parent/Guardian Signature: _____ Date: _____

Print Name: _____

NOTE: Please only send the \$10.00 application fee with this application. When your application is received by our staff you will receive an email or mail acknowledgement followed by further instructions.

MAIL THE APPLICATION TO:

Girls Rock Roanoke

Attn: Lacey

PO Box 4242

Roanoke, VA 24015

THANKS for applying to Girls Rock Camp – we hope to ROCK with you soon!