Indiana University Jacobs School of Music
Summer String Academy Return Checklist

Deadline for return of materials is a **June 1, 2012** postmark. Failure to meet this deadline will jeopardize your reserved place in the String Academy. We encourage you to complete your registration as soon as possible.

Mail all forms and payments to:

Pre-College and Summer Programs Office
I.U. Jacobs School of Music
1201 East Third Street
Bloomington, IN 47405

Or fax forms to: 812-855-4839
Attn: Pre-College and Summer Programs Office

The following material is attached, please check off each item.

1. _____ *Consent for Medical Treatment of a Minor*, completed and signed by parent or legal guardian.

2. _____ *Medical Wellness Form*, completed by parent or legal guardian and signed.

3. _____ *Acceptance and Conduct Agreement*, completed and signed.

4. _____ *Cell Phone Policy Agreement*, completed and signed.

5. _____ *Media Release Form*, completed and signed.

6. _____ *Practice Agreement*, completed and signed.

Name of Participant: __________________________________________
(Please print)

Signature of Parent or Guardian: ______________________________________

PLEASE RETURN THIS FORM
Consent for Medical Treatment (minors only)

I, ______________________, am the parent or legal guardian of ________________________________________________

and I authorize (name of program) ________________________________________________________________ to obtain emergency medical treatment

of this minor by an appropriate health care professional should the need arise while he/she is attending the program.

Signature ______________________ Date ______________________

Medical Information (all participants)

Participant's name ______________________

Age _______________ Birthdate _______________ Date of last Tetanus Toxoid ______________________

Past health/injuries ______________________ Present health ______________________

__________________________________________ Allergic reactions ______________________

__________________________________________ Present medication ______________________

☐ Check here if the participant has special needs and might require accommodations to fully participate in the program. A staff member will contact

the parent or guardian for details.

Other information that would be useful in the event medical treatment is necessary: ____________________________________________

Insurance Information (all participants)

Parents or legal guardians are responsible for the cost of a minor's medical treatment. When available, insurance information will be processed by the

health facility performing the treatment, otherwise you will be contacted for payment by cash, check or credit card.

Insurance company ______________________ Address ______________________

City/State/Zip ______________________

Policyholder’s name ______________________

Policy number ______________________

Contact People (all participants)

In an emergency, parents or legal guardians can be reached as follows:

Name ______________________ Relationship to minor ______________________

Address ______________________ Daytime phone ______________________

City/State/Zip ______________________ Evening phone ______________________

Cell phone ______________________

Name ______________________ Relationship to minor ______________________

Address ______________________ Daytime phone ______________________

City/State/Zip ______________________ Evening phone ______________________

Cell phone ______________________

If other information would be helpful in contacting you, please indicate:

© 2010
The Jacobs School of Music takes many precautions in an effort to ensure the safety of the young musicians entrusted to its care. At the Summer String Academy, vigilance in all areas is a top priority. That is why we require you to complete this form containing supplemental contact, medical and music wellness information in addition to the standard “Consent for Medical Treatment” form required of all pre-college students attending an I.U. residential program. Please answer all points below as fully and specifically as possible. Return this form to the Office of Pre-College and Summer Programs by JUNE 1, 2012.

The data you supply about your child’s medications and medical conditions, allergies, dietary preferences will be held in strict confidence. Only the director, administrator, and the adult counselor—the team most likely to be called on to respond to an injury or illness—will be privy to the information. It will help us to make your child’s stay at Indiana University healthier and happier even if this form is never needed for a medical emergency. In the unlikely event that a serious or potentially serious problem arises, Academy personnel will make every effort to reach you as soon as the situation permits. To maximize your chances of being consulted if a problem arises, be sure to list all means by which we can contact you.

PRINT OR TYPE IN BLACK INK

Student: ___________________________________________ Birthdate: _______________________

Home telephone: ____________________________ Student’s E-mail address (print!) _________________________

Home address: ___________________________________________ City: ____________ State: ______  Zip: ____________

Father’s name: ____________________________ Day phone: ____________________________ Eve. phone: ____________

Mother’s name: ____________________________ Day phone: ____________________________ Eve. phone: ____________

Mother/Father/Guardian Cell phone #: ____________________________ (M) and ____________________________ (F/G)

M/F/G Home FAX #: ____________________________ Other # where we can FAX you: ____________________________

M/F/G E-mail addresses (print clearly!): ____________________________________________ and ____________________________________________

Legal Guardian: ____________________________________________ Day phone: ____________________________ Evening phone: ____________

Student’s local address if not living on campus: ____________________________________________ City: ____________ Zip: ____________

Local host (if not parent): ____________________________________________

Local host’s day phone: ____________________________ Evening phone: ____________________________

Local host’s cell phone #: ____________________________ FAX #: ____________________________ E-mail: ____________________________

In the event of an emergency, whom should we contact in Bloomington if the local host is not reachable?

☐ No one--contact a parent. ☐ Contact the person below:

Name: ____________________________________________ Day phone: ____________________________ Evening: ____________________________ Date: ____________________________

Parent/Guardian’s Signature ____________________________________________

Does the student have any DIETARY RESTRICTIONS? ____________________________________________
MISCELLANEOUS HEALTH INFORMATION

If your child has a condition that bears watching, the information you provide will help us to be on the alert for signs of a developing problem before the situation is serious.

Blood type, if known: ______________ Appendix removed? __________

Student’s family or personal doctor ______________________________ Phone __________________________________

Medical Specialist treating the student: __________________________ Phone __________________________________

Dentist or Orthodontist: ________________________________________ Phone __________________________________

HAS THE STUDENT RECEIVED TREATMENT FOR ANY OF THE FOLLOWING in the last 2 years?

☐ Stress-related conditions (e.g., acid stomach, insomnia)

☐ Performance anxiety ☐ General anxiety, distraction, depression (specify) ________________________________

☐ Frequent or severe headaches ☐ Severe cramps, PMS ☐ Dizziness or fainting spells ☐ Epilepsy or seizures

☐ Heart condition or other serious health problem (please specify) _________________________________________

☐ Diabetes ☐ Any family history of diabetes? __________________________________________________________

☐ Eating disorder (anorexia, bulimia, other) Currently under treatment? _________________________________

☐ Learning challenge, e.g., dyslexia, ADD (Attention Deficit Disorder), ADHD, or other learning problem

Specify type, if professionally diagnosed: ______________________________________________________________

☐ Anger management problem, conduct disorder or other behavior problem (specify) ______________________

Is the student currently receiving study counseling, family counseling or mental health counseling? ☐ yes ☐ no

If yes, is there anything the counselors should know about the student’s condition? Any warning signs they should be alert to?

________________________________________________________________________________________________

________________________________________________________________________________________________

PLEAS E RETURN THIS FORM
Indiana University Jacobs School of Music  
STRING ACADEMY PRACTICE AGREEMENT

• I agree to be in my assigned practice room, during practice time. Practice rooms are for practicing ONLY.

Practice Schedule

8:00 am - 9:00 am     Practice  
9:00 am - 9:10 am     Break  
9:10 am - 10:15 am    Practice  
3:45 pm - 4:35 pm     Practice  
4:35 pm - 4:45 pm     Break  
4:45 pm - 5:30 pm     Practice

• I agree to be on time to each practice session.

• I understand that it is my responsibility to have my own practice supplies. (Suggested supplies include: metronome, wristwatch or clock, scotch tape, rosin, band aids, pencils, etc.)

• I understand that practice breaks are to be used for socializing, using the restroom, snacks and stretching.

• I understand that playing outside the practice rooms, in the halls, is not allowed.

• I realize that I will be sharing practice facilities with Indiana University Jacobs School of Music students and staff. I also understand the need to be respectful and polite. My behavior will not interfere with their activities in any way. In addition, I agree to take care of the equipment in each practice room that I use.

• I know extra practice does not apply towards required practice time.

• I understand that it is my responsibility to be in my dorm room at the required time in order to get enough sleep at night. This will allow me to be awake and productive during all practice sessions.

• I realize that violations of this agreement may result in a phone call to my parent/guardian. Furthermore, it may have a bearing on my acceptance to this camp in the future.

PRINT STUDENT NAME________________________________________________________

STUDENT SIGNATURE _______________________________________ DATE___________

PARENT/GUARDIAN SIGNATURE______________________________DATE___________

Home Phone Number _____________________       Work Phone _________________________

Parent’s E-mail ________________________________________________________________

PLEASE RETURN THIS FORM
Indiana University Jacobs School of Music
STRING ACADEMY ACCEPTANCE AND CONDUCT AGREEMENT 2012

I, __________________________ am planning to attend the 2012 Indiana University String Academy (Print name)

THE FOLLOWING REGULATIONS SHOULD BE CAREFULLY READ AND UNDERSTOOD BY BOTH THE STUDENT AND HIS/HER PARENTS. THIS FORM SHOULD THEN BE SIGNED AND RETURNED WITH OTHER REGISTRATION MATERIAL.

1. All use of tobacco, alcohol, and other drugs is strictly prohibited. Possession and/or use of tobacco, alcohol, or other controlled substances will result in immediate dismissal from the String Academy.

2. Male and female students must remain on their respective floor(s) and should not enter each other’s floor(s).

3. Academy students must be on their assigned dormitory floor by 10:00 p.m. each night, unless they have signed out in advance for a special activity.

4. String Academy student may not leave campus at any time without supervision by String Academy staff or faculty. Off campus trips with non-String Academy supervision must have the written permission of parent/guardian on file and the String Academy director’s permission.

5. Academy students will not be permitted to operate a motor vehicle while attending the Academy. Indiana University assumes no liability in case of an accident involving non-university vehicles or theft/loss of same.

6. Television sets are not allowed in the dorm rooms.

7. Academy students are expected to behave in a mature and responsible manner. Students will be held strictly liable for damage to University property and will also be subject to disciplinary action.

8. My parents/guardians and I release Indiana University and its agents/employees and the IU String Academy and its agents/employees from any and all claims, demands and causes of action on account of any injury, illness or loss which may occur during my participation in the String Academy, June 16 – July 14, 2012.

9. I will not open the windows in my Forest Center dorm room.

10. I will not re-arrange the furniture in my Forest Center dorm room.

11. I will not enter any other residential floor other than my dorm room floor in Forest Center.

DISCIPLINARY ACTION RESULTING IN IMMEDIATE DISMISSAL FROM THE STRING ACADEMY WILL BE TAKEN BY THE ACADEMY DIRECTOR IN CASES OF NON-COMPLIANCE WITH ACADEMY AND DORMITORY REGULATIONS.

I have read and understand the above regulations. I hereby agree to comply with the policies of the String Academy.

Student’s printed name________________________________________

Student's signature ______________________________________ Date ____________

Parent/Guardian's signature _______________________________ Date ____________

PLEASE RETURN THIS FORM
Indiana University Jacobs School of Music
STRING ACADEMY CELL PHONE POLICY 2012

Dear Parents,

In order to provide an atmosphere of musical learning that is conducive to the rigors of our program and respectful to our world-class faculty, we have developed a new cell phone policy.

The following rules must be followed during the 2012 String Academy:

1. All cell phones must be turned off during practice and lesson times: 8:00 AM - 12:30 PM and 3:30 - 5:30 PM. Monday thru Friday

2. All cell phones must be turned off before entering any room in which a concert or master class is being held, including all parts of a hall or auditorium

3. All cell phones must be turned off by “lights out” time.

On the first occurrence of improper cell phone use as determined by the String Academy staff, a participant’s parent will be contacted by the Director of the String Academy. On the second occurrence of improper cell phone use as determined by the String Academy staff, a participant’s parent will be contacted by the Director of the String Academy and the participant’s cell phone will be confiscated, and returned on the last day of the String Academy.

We fully appreciate the security a cell phone can provide. Rest assured that the head counselors and/or Christina Hightower may always be reached in case of an emergency. Rather than attempt to control when cell phones may be used, it is easier for us, and for our String Academy participants to understand and agree when cell phones cannot be used. Accordingly, it is the obligation of each participant’s parents to explain the requirements of, and ensuring compliance with, this policy. It is not our intention to confiscate cell phones. However, we simply cannot tolerate the interruptions and interferences that having a cell phone tends to create.

Except as provided above, the students may have unlimited cell phone use. We strive to continue to bring in a world-class faculty to inspire and develop your young musicians. We trust we will have the full support of parents in our endeavor to make this a great experience for your child.

********************************************************************************

By signing, we understand and agree to be bound by the terms of this policy:

____________________________________
Parent Signature

____________________________________
Student Printed

____________________________________
Student Signature

PLEASE RETURN THIS FORM
AUDIO/VIDEO/PHOTO RELEASE FORM

This form must be completed and signed by the parent of a minor child attending an Indiana University Jacobs School of Summer String Academy, June 16 to July 14, 2012.

My child (under the age of 18) ___________________________________, plans to participate in an IU Jacobs School of Music Pre-College Program or Summer Academy. I understand that audiotapes, videotapes, and/or photographs may be taken of the Program participants. I hereby give my consent for my child (under the age of 18) to audiotaped, videotaped, and/or photographed in connection with their participation in the Program.

I further agree that all such audiotapes, videotapes, and or photographs shall be the exclusive property of Indiana University and, subject to the limitations expressed below, I release and give to Indiana University all rights of ownership and all rights to copy, and publish, and use such audiotapes, videotapes, and/or photographs. I acknowledge and agree that Indiana University may use any and all audiotapes, videotapes, and/or photographs for educational and promotional purposes, included but not limited to publication in brochures and other promotional materials and on the University’s websites. I understand that Indiana University will not identify my child (under the age of 18) by name or allow any third party to use the audiotapes, videotapes, and/or photographs for commercial purposes without obtaining my written permission in advance.

I HEREBY CONSENT TO THIS AUDIO/VIDEO/PHOTO RELEASE.

Parent Signature: ____________________________________________

Printed Name: ________________________________________________

Date: _____________________
Indiana University Jacobs School of Music
SUMMER STRING ACADEMY GENERAL INFORMATION

Important Policy for 2012 String Academy Students:
All students who are arriving at the Indianapolis International Airport unattended by an adult must travel to and from the airport to the Forest Residence Hall (1725 E. Third Street, Bloomington, IN) by limousine service – there are no exceptions to this policy.

Classic Touch Limousine: 800-319-0082 or http://www.classictouchlimo.com/
You must mention IU String Academy when you make your reservation in order to receive the special rate for Indiana University Jacobs School of Music String Academy participants. If making the reservation online you must mention Summer Camp-String Academy in the comment box. There is a discount offered for multiple passengers. There is also a $10 charge for cellos as they are considered unique and oversized luggage.

Contact:
1. Questions about payment should be sent to musicsp@indiana.edu.
2. All other concerns need to be directed to: Christina Hightower, Assistant Director, crunnacl@indiana.edu, 812-856-1523 or 812-345-9331.

Academy Study Program
Each student will be enrolled in two applied music lessons weekly and an appropriate chamber music ensemble. Applied teachers are assigned by the Director of the String Academy with the approval of individual teachers. A number of violin students will be asked to play viola in chamber music groups. These students will have use of Indiana University violas. If you are a violinist who also has a viola, you are encouraged to bring it. Placement into ensembles is made by the faculty of the String Academy. Selected students will also be invited to participate in the SA Chamber Orchestra.

Arrival
A map of the Indiana University campus may be found at http://www.iub.edu/~iubmap/. Please plan to arrive in Bloomington between 1:00 and 4:00 p.m. on Saturday, June 16, 2012. Check-in will be at Forest Residence Hall.

Early and Late Arrival
Students who must arrive before Saturday, June 16 will be responsible for their own accommodations. Students who know they will miss the 4:00 p.m. closing of registration on June 16 should contact Christina Hightower, 812-345-9331, crunnacl@indiana.edu so that counselors may be aware of late arrival. Students are required to depart the dormitory by noon on July 14.

If there are questions on the day of arrival, please call Christina Hightower at: (812) 345-9331 as the Office of Pre-College and Summer Programs is closed on Saturday and Sunday.
Registration and Orientation

Saturday June 16
1:00 - 4:00 pm: **Registration check-in and orientation** will be in the Forest Residence Hall lounge, at 1725 East 3rd Street, Bloomington: [http://www.indiana.edu/~iubmap/](http://www.indiana.edu/~iubmap/).
- Students will receive room key and meal card at this time.
- Violists and cellists sign up for chamber music placement auditions (held the next day).
  Violinists may also audition but it is not required.
4:00 pm: Introductory meeting with parents, counselors and faculty at Forest Residence Hall.
7:00 pm: Meeting with students and String Academy counselors to discuss rules and regulations (in Forest lounge)
8:00 pm: Atar Arad/Evelyne Brancart, Auer Hall

Sunday, June 17

*9:00-1:00 pm: Auditions for violists and cellists will be held for placement in Chamber Music groups. Auditions for violinists will be optional. Chamber Music placement of violins will be made from the audition recording. Be prepared to play a movement of a concerto or short piece.*
4:00: Meet with Faculty in MA454
8:00: Pressler and Friends, Auer Hall

Counselors
Counselors engaged by the String Academy will live in Forest Residence Hall (Forest Quad) with the students, and supervise their activities, answer questions, and provide assistance as needed.

Residence Hall
The String Academy will be housed in Forest Residence Hall: [http://www.indiana.edu/~iubmap/](http://www.indiana.edu/~iubmap/)
Boys will be housed in a separate wing (or dorm) from the girls. Each wing will also house String Academy counselors. All rooms are air-conditioned. Coin-operated laundry facilities are available.

| Linens: students staying in Forest Quad may bring their own pillow, pillow case, extra long twin sheets (fitted and flat) and towels. But students may purchase the above for $60 for the session available with your housing option. |

Please note: Telephones are not provided and televisions are not allowed in individual rooms. The fee to replace a lost room key is $50.

Meals
Students will be issued meal cards at check-in. The replacement fee for a lost meal ticket is $10. Meals will be served at Read Cafeteria. Meals will begin with dinner, Saturday, June 16 and end with breakfast, Saturday, July 14. Meal hours are subject to change, so please check with your counselors!

<table>
<thead>
<tr>
<th>7:00 - 9:00 a.m.</th>
<th>Breakfast (Weekend hours are often different)</th>
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</thead>
<tbody>
<tr>
<td>12:00 - 1:15 p.m.</td>
<td>Lunch</td>
</tr>
<tr>
<td>5:00 - 6:15 p.m.</td>
<td>Dinner</td>
</tr>
</tbody>
</table>
Mail
Mail to String Academy students should be addressed as follows:

Student name
c/o String Academy
Forest Residence Hall
1725 E. Third Street
Bloomington, IN 47406-7509.
(Do not include "Indiana University" in the address)

Individual room numbers will be available at check-in and not before. Be sure to let your parents know your hall name, room number, and counselor’s name and phone number.

Dress
Casual attire will be acceptable for most activities. However, students should bring at least one formal outfit (dress or skirts and blouses for girls, suit or slacks and coat for boys). Master class and recital participants will be expected to dress well for their performances. Air conditioned rooms in the Jacobs School of Music can be quite cool. A sweater would be advisable.

Hours
All String Academy activities begin at 8:00 a.m. sharp. Students will be expected to be on their assigned floor by 10:00 p.m. each night, unless they have signed out in advance for a special activity. Curfew extensions are granted only for special activities, and rarely exceed an extension of one hour.

Daily Schedule
All students will be required to follow the general daily schedule:

- 7:00 a.m. - Breakfast
- 8:00 a.m. - Practice*
- 10:30 a.m. - Chamber Music, Chamber Orchestra
- 12:30 p.m. - Lunch and Free Time
- 3:45 p.m. - Practice
- 5:45 p.m. - Dinner
- 7:00 p.m. - Master Classes, Concerts, etc.

*Younger students will be assigned to University students for help in some of their practice sessions.

Concerto Competition
The String Academy Concerto Competition will be held during the third week. If you are interested in entering this competition, please come prepared with the music. There will be a winner in the violin, viola, and cello. All will perform during the final week of concerts. The required repertoire is:

Violin: Haydn G Major Concerto (Movement 1)
Viola: Telemann Concerto in G Major (Movements 1 and 2)
Cello: Haydn Concerto in C Major (Movement 3)
Entertainment and Recreation
Various recreation and social events are provided by the Academy. Free time for recreation or relaxation will be scheduled in the afternoon, usually from 1:00 to 3:30 p.m. All Jacobs School of Music recitals and concerts will be open to String Academy participants as well as the university athletic facilities for swimming, tennis, handball, and racquet games, etc. (There is a small fee for use of the swimming pools.) Bring swimwear, rackets, etc. if interested. Tours of various Jacobs Music School and University facilities, (Musical Arts Center, Main Library, Lilly Library, and Art Museum) can be arranged on request; make your wishes known at the orientation meeting. Students will need cash only for laundry expenses, snacks, cab/limo fares, and elective recreational fees. They may also need to purchase some music. **Students are encouraged NOT to bring large amounts of money to campus.** Out-of-town checks will not generally be accepted by local merchants, and students may have difficulty in cashing personal checks. We suggest the use of travelers’ checks.

General Policies
Policies and procedures for the Academy are established by the Academy Director, in cooperation with the Dean of the Jacobs School of Music. Indiana University is operated by the State of Indiana and is subject to all laws, statutes and procedures of the state. **DISCIPLINARY ACTION, IF NECESSARY, WILL BE TAKEN BY THE ACADEMY DIRECTOR** in case of non-compliance with Academy or Halls of Residence rules and regulations.

String Academy students may not leave campus at any time without String Academy staff or faculty.

**Off-campus trips with non-String Academy supervisors must first have the written permission of parent/guardians on file and the director of the String Academy’s permission.**

Cars
STUDENTS SHOULD NOT BRING AND STORE CARS UNLESS ABSOLUTELY NECESSARY. If a students must drive to Bloomington alone their car needs to be stored at the Indiana University stadium for the duration of the Academy, and must leave keys with the counselors. Further instructions will be given at Registration. The Academy is not responsible for the safety of cars stored at the stadium. **Academy students are not permitted to operate any motor vehicles while attending the Academy.**

T-shirts/photo and Concert Book
T-Shirts, photos and Summer String Academy Concert Book may be ordered online before the Academy begins. Please click on the online registration link, then log in with your user name and password.

Visa Information
Students traveling to the United States from foreign countries are encouraged to enter on a tourist Visa to attend pre-college program at Indiana University. Please contact the Office of Pre-College and Summer Programs, musicsp@indiana.edu if you have a visa question.
Cancellation
In cases of last minute cancellation for reasons beyond the student’s control, all fees paid, less $300.00, will be refunded.

Emergency
In the event of an emergency, the fastest way to reach a participant is through the student’s counselor or head counselor. The administrator, Christina Hightower (812) 345-9331, should be the first contact in an emergency. The Office of Pre-College and Summer Programs (812) 855-6025, and the String Academy Office (812) 856-1523 may be called weekdays 8:00-12:00, 1:00-5:00 pm. Please check these numbers.

Absences
Sickness is the only acceptable excuse for absence from any scheduled activity, class or practice session. In case of sickness, a counselor or other staff member will see that proper medical attention is received. Medical care is available from:

Medical Care
1. Bloomington Hospital Emergency Room (24 hours a day)
2. I.U. Healthcare Center, 8:00-4:30 Monday-Friday, closed weekends.
3. Promptcare Walk-In Clinics:
   Eastside: 8:00 a.m-8:00 p.m. every day
   Westside: 8:00 a.m. -8:00 p.m. Monday- Saturday (closed Sunday)

Doctor's services, medicine, mental health, academic counseling, physical therapy, etc., are not included in the Academy fees.

End of String Academy
String Academy ends with a concert and reception on the evening of Friday, July 13. Concert time is 6:00 PM. Students must remove all personal belongings from the residence hall and return room/residence hall keys and meal card by 12:00 noon on Saturday, July 14. Difficulties with this check out time should be reported to a counselor.

Hotel/Motel reservations
Parents/Guardians should make hotel/motel reservations early if they will be staying over to attend the concert. There are many other events occurring that same weekend and local housing will fill up quickly. For local lodging information please click on “Visiting” in the left menu of the web site.

Indiana University Jacobs School of Music audition
High School seniors interested in auditioning for Indiana University will have this opportunity during the last week of String Academy.