



# THE OPERA EXPERIENCE

JUNE 4-8, 2012

For young singers entering grades 4-9 in the fall of 2012

## REGISTRATION FORM

### CAMPER INFORMATION

NAME (how it should appear on name tag) \_\_\_\_\_ Male Female  
*circle one*

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

SCHOOL \_\_\_\_\_ GRADE IN FALL 2012 \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

Do you take voice lessons? \_\_\_\_\_ If yes, who is your instructor? \_\_\_\_\_

VOICE TYPE \_\_\_\_\_ Do you play an instrument? \_\_\_\_\_

If yes, which instrument(s) \_\_\_\_\_ T-shirt size: S M L XL  
*adult sizes*

### PARENT / GUARDIAN INFORMATION

NAMES \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

DAYTIME PHONE (S) \_\_\_\_\_

EVENING PHONE \_\_\_\_\_

I also give permission for photos and video to be taken of my child to be used for archival, publicity and promotional use.

Signature \_\_\_\_\_ Date \_\_\_\_\_

CAMP REGISTRATION FEE IS **\$200.00**.

CAMP FEES MUST BE INCLUDED WITH YOUR FORMS TO RESERVE YOUR PLACE AND MAIL TO: **HOUSTON GRAND OPERA, ATTN: MARCIE LOU, 510 PRESTON, HOUSTON, TX 77002**. REGISTRATION BEGINS **FEBRUARY 1**. CAMP SPACE IS LIMITED, SO PLEASE BE AWARE THAT APPLICATIONS ARE PROCESSED ON A FIRST-COME BASIS. THE DEADLINE FOR **REGISTRATION IS JUNE 1**.

**Refund Policy:** If you wish to withdraw before June 1, there will be a \$75 penalty, and the remainder of your fees will be returned. **THERE WILL BE NO REFUNDS AFTER JUNE 1**. There are no refunds for absences.

For Office Use Only: \_\_\_\_\_ ORD \_\_\_\_\_ CID \_\_\_\_\_ Date \_\_\_\_\_ CK



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June 4-8, 2012

## OPERA CAMP INFORMATION

### GENERAL INFORMATION

**Camp Hours:** 9:00 AM – 3:00 PM Monday- Thursday  
9:00 AM – 1:30 PM Friday

### **Drop-off/ Pick-up Information**

**Location:** The Wortham Theater Center  
510 Preston (stage door)

**Morning Arrival Time:** no earlier than 8:45 AM

**Afternoon pick-up time:** no later than 3:10 PM (children will not be supervised after scheduled pick-up time)

### **Items to bring to Camp:**

Sack lunches- Monday - Thursday

There are vending machines for drinks. Lunches should not include anything needing to be heated or cooked. Lunch will be provided on Friday.

\*The use of cell phones, pagers, and other electronic devices will only be allowed before camp, after camp, and during lunch.

### OPERA CAMP DAILY SCHEDULE

#### **Monday - Thursday**

##### Morning Sessions

Chorus

Voice Class

Drama/ Movement

##### Afternoon Sessions

Music Theory

Chorus

\* **Thursday-** solo performance/audition for a panel - for written critique and possible selection to sing on Friday's presentation.

#### **Friday**

There will be a presentation of the music learned by the singers at 12:00 PM. Campers will wear Opera Camp T-shirts and jeans for the performance. The presentation will be followed by lunch provided by Houston Grand Opera for everyone. There is no afternoon session on Friday; camp ends with the presentation and lunch.



## MEDICAL PERMISSION & RELEASE FORM

1. I give permission for my child, \_\_\_\_\_, to take part in all Houston Grand Opera Opera Camp activities. I understand that my child’s behavior must be appropriate for the activities in this setting. If my child’s behavior is disruptive or inappropriate, I understand that he/ she may be asked to leave the setting. I will not hold Houston Grand Opera responsible for any accident or harm which may befall my child during the course of the Opera Camp.

\_\_\_\_\_ Parent/Guardian (please initial)

2. Is your child taking any medications or does he/she have any allergies/physical limitations of which the staff should be aware?

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Parent/Guardian (please initial)

3. **Emergency Contacts:** In case of an emergency, please provide the names of two persons to call if you cannot be reached.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

4. **Child’s physician’s contact information:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

5. **Medical Emergency:** If you, your emergency contact, or your child’s physician cannot be reached, you authorize Houston Grand Opera to consent to any emergency medical treatment—inclusive of surgical intervention—for your child, \_\_\_\_\_. You further agree to assume liability for any medical expenses incurred.

\_\_\_\_\_ Parent/Guardian (please initial)

6. As an authorized parent/guardian, I hereby grant permission for my child, \_\_\_\_\_ to attend Houston Grand Opera Opera Camp at the Wortham Theater Center. Further, I grant permission for photos and video of this child to be used for archival, publicity and promotional use.

\_\_\_\_\_  
Parent/Guardian Signature Date