## 2013 APPLICATION IDAHO CHAMBER MUSIC WORKSHOP August 11-16 and /or HELL'S CANYON FIDDLE FEST August 16-17 McCall, Idaho

Email: <u>idahomusicworkshops@gmail.com</u> Website: <u>http://jhl.tulsaconnect.com/janajae.htm</u>

Please complete application, and return it **with your check** postmarked by April 30, 2013 to: **Idaho Music Workshops**, c/o Jana Jae, PO Box 35726, Tulsa, OK 74153

Refunds will be honored before June 30, 2013 less a \$30 nonrefundable administrative fee.

Late application fee: \$25 (postmarked after April 30)

Enclosed please find my check, made payable to Idaho Music Workshops for:

## **Chamber Music Workshop**

\_\_\_\_\_\$495 Chamber Music, One Person, Mon. arrival tuition, shared occupancy, meals, canoeing, lake use

**\$565 Chamber Music, One Person, Sun. arrival** tuition, shared occupancy, meals, canoeing, lake use

- \_\_\_\_\_\$375 Off-Campus residency, Chamber Music, includes tuition, meals, canoeing, lake use
- \_\_\_\_\$10 Extra dinner Friday
- \_\_\_\_\_\$55 Extra housing Friday
- **\_\_\_\_\_\$75** Daily Additional <u>non-enrolled</u> guest: lodging, meals, lake x \_\_\_\_(days) x \_\_\_\_\_ (no. of guests)

## **Fiddle Fest**

- \_\_\_\_\_\$175 Fiddle Fest, One Person, tuition, shared lodging Fri night, meals, canoeing, lake use
- \_\_\_\_\_\$125 Off-Campus residency, includes Fiddle Fest tuition, meals, canoeing, lake use
- **\_\_\_\_\_\$75** Daily Additional <u>non-enrolled</u> guest: lodging, meals, lake x \_\_\_\_(days) x \_\_\_\_\_ (no. of guests)
- \_\_\_\_\_\$150 Chamber Musician enrollment in Fiddle Fest, including Friday's lodging, meals, lake

Extras (Let us know ahead of time, please.)

- \_\_\_\_\_\$55 Extra night's housing
- \_\_\_\_\$10 Extra dinner
- \$35 Daily Added non-enrolled guest: meals & lake only x (days) x (no. of guests)
- **\_\_\_\_\$30** Late application fee (postmarked after April 30)
- \_\_\_\_\$25 Daily RV parking, limited spaces, electricity, water hook-ups, trees, 1 mi. away from Lake Lodge
  \_\_\_\_ Total Enclosed

I may cancel for emergency reasons by notifying the Committee in writing by June 30, 2013, for a full refund less a \$30 administrative fee. Fee is nonrefundable if I cancel my reservation after June 30, 2013.

Name						
Last		First		Middle initial		
Stre	eet	City		State	ZIP	
Telephones						
	lome	Cell			Work	
E-mail						
The instrument(s)	I will play (in order	of preference)	) are: (1)		(2)	
Performance Level	: Instrument (1): Instrument (2):					
I study music: Priv	vately In schoo	ol Occasi	onally			
I play often in: Stri	ng quartets E	nsembles	Orchestra	Oth	er	
What would you li	ke to work on durin	g this Worksh	op?			
like to be placed in Name, address and	a group. Yes phone number of p	No erson and doc	tor to call in the	e ever	<b>3:00 p.m. and 7:30 j</b> at of an emergency:	
Doctor		Pho	ne			
Health Ins.		#	Gro	oup	Phone	
NOTE: Any specia	ll health condition, a	Illergies to foo	od, vegetarian p	orefere	ence?If so, plea	se indicate:
Committee, st successors, ar and an invited	taff and instructors. I ag id representatives, from	gree to release B any claim or act or related to part	rundage Inn and th ion for injury, dan icipation of unders	ne Worl nage or signed	Vorkshops, Brundage Inn kshop Staff and Committ theft to undersigned and (and guest) in the said ev	tee, their agents, l his/her property,
Date		Signature of app	olicant			
Date		Signature of app	olicant			