



# NATIONAL JAZZ WORKSHOP 2017—REGISTRATION FORM

June 25–30, George Mason University

## Personal Information

ID (assigned by staff) \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Country \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Home Phone \_\_\_\_\_ Participant Cell \_\_\_\_\_

Participant E-mail \_\_\_\_\_

I would like to receive e-mails about NJW, Shenandoah University, and George Mason University music events.

T-shirt Size (adult sizes)  S  M  L  XL  XXL

## High School and College Students

Grade/Year \_\_\_\_\_ Name of School \_\_\_\_\_

## Emergency Contact

Emergency Contact 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

## Vehicle Information

*If you are parking a car on the campus during the workshop, please provide your vehicle information. This information may be updated when you arrive.*

Make/Model \_\_\_\_\_

Color \_\_\_\_\_ License Plate \_\_\_\_\_ State \_\_\_\_\_

Have you attended NJW before?  Yes  No If yes, how many times? \_\_\_\_\_

How did you hear about the National Jazz Workshop?

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

**Choose a Playing Status**

- Playing** You will be assigned to a big band or combo. *Those on Performance Track and all participants under age 18 MUST participate in an ensemble*

Primary Instrument \_\_\_\_\_

Secondary Instrument \_\_\_\_\_

If needed, would you perform in an extra ensemble on your secondary instrument?  Yes  No

Music Awards, Honor Bands, etc. \_\_\_\_\_

\_\_\_\_\_

- Non-playing** You will not play in any ensembles.  
*You must be 18 or older to sign up for this status regardless of your track.*

**Choose a Track** *Choose only one track*

- Performance** This track focuses on improvisation, jazz pedagogy, and instrumental specific master classes and other instructional opportunities. *You MUST choose Playing Status below.*

**Choose a Jazz Theory Classification** *For Performance Track Only.*  
*This is about jazz theory—not your ability to play an instrument.*

- Beginner** Little to no jazz theory knowledge.
- Intermediate** Some knowledge of jazz theory such as scales, chords, etc.
- Advanced** Substantial knowledge of jazz theory

- Observation** This track is ideal for educators and offered for adults only. Observe students or audit seminars and classes on your own schedule. *Playing Status or Non-playing status. You MUST be 18 or older for this status. You may play in an ensemble in addition to observing seminars and classes.*

**High School Students** please have your band director **or** private instructor review the choices you have made.

Band Director \_\_\_\_\_

E-mail \_\_\_\_\_

Private Instructor \_\_\_\_\_

E-mail \_\_\_\_\_

ID (assigned by staff) \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

## Fees and Payment

- \$450 Tuition** This covers the cost of participating in all workshop activities. It does NOT include meals or dorm fees.
- \$35 NJW Theory Book** All Performance Track participants must purchase the NJW Theory Textbook. Book will be available for pick-up at registration.  
*mandatory for performance track*
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## Method of Payment

- Pay Pal** Use the links on the NJW web site to pay via Pay Pal. [www.nationaljazzworkshop.org](http://www.nationaljazzworkshop.org)
- Credit Card** Provide credit card information below.
- Check** Mail check with registration form. Make checks payable to National Jazz Workshop.
- Money Order** Mail money order with registration form. Make money orders payable to National Jazz Workshop.

### Credit Card Information

Select Card Type \_\_\_\_\_

Name on Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Three-digit Security Code (on back of card) \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

**Medical History**

1. Are you allergic to any of the following?

Medications  No  Yes *If yes, please specify* \_\_\_\_\_Insects  No  Yes *If yes, please specify* \_\_\_\_\_Other  No  Yes *If yes, please specify* \_\_\_\_\_2. Do you have a seizure disorder (epilepsy)?  No  Yes3. Do you have diabetes (adult or juvenile)?  No  Yes4. Do you have High Blood Pressure?  No  Yes

5. Do you have or have you ever had the following diseases?

Heart Disease  No  YesLung Disease  No  YesKidney Disease  No  YesLiver Disease  No  Yes6. Do you have asthma?  No  Yes

7. Date of Last Tetanus Shot \_\_\_\_\_

8. Please list any medications the workshop participant is currently taking as well as the current dosage.

**Medications for Minors** (*those under 18 years of age*) My child does not need to take any prescription medication while at the National Jazz Workshop. My child will need to take prescription medication while at the National Jazz Workshop. My child has my permission to self-administer the above medication as specified. My child needs to have his/her medication supervised.**Supervised Medications**Minors (*those under 18 years of age*) who require supervised medication will turn those medications in at registration. All medications **MUST** be in original prescription containers and sealed in a Ziplock bag with the participant's name. Prescription medications are kept by NJW staff.**Medical Insurance Information**

Primary Insurance Company \_\_\_\_\_

Phone Number \_\_\_\_\_

Subscriber's Name on Policy \_\_\_\_\_

Policy Number \_\_\_\_\_

Employer \_\_\_\_\_

Employer Phone Number \_\_\_\_\_

Employee's Title \_\_\_\_\_

Relationship to student (if applicable) \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

## Rules and Regulations—Code of Conduct

*If you wish to attend the National Jazz Workshop, you must agree to obey the following rules and regulations:*

1. Any minor (those under age 18) participating in the NJW must attend all assigned rehearsals, concerts, classes and planned activities
2. I.D. tags must be worn at all times on the George Mason University campus.
3. For safety and security, minors (those under age 18) may only leave the GMU campus if special arrangements have been made with parent/guardian and NJW officials, and with appropriate adult supervision.
4. Destructive or disruptive behavior will not be tolerated. Any participant exhibiting uncivilized behavior will be subject to disciplinary action, payment for damages and dismissal from the NJW. Upon dismissal of a minor (*those under age 18*) a parent/guardian will be contacted to remove the student from the workshop.
5. Use/distribution of alcohol/illegal drugs by any participant will result in immediate dismissal.  
**There will be no exceptions.**

### Required Signature (Participants Age 18 and Over)

I, the workshop participant, hereby authorize NJW Staff to seek medical treatment for me in the event of a medical emergency. Furthermore, I agree to obey the rules and regulations stated above under Rules and Regulations / Code of Conduct.

Printed Name \_\_\_\_\_

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

### Required Signature (Participants Age 17 and Under)

I, the workshop participant, agree to obey the rules and regulations stated above in the Rules and Regulations— Code of Conduct. I understand that failure to obey the rules and Code of Conduct will result in expulsion from the workshop.

Printed Name \_\_\_\_\_

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

### Required Signature (Parents or Guardians of Minors)

I, the parent or guardian of the workshop participant, hereby grant permission for my child to participate in the National Jazz Workshop to be held at George Mason University. I authorize NJW staff to seek medical treatment for my child in the event of a medical emergency. In addition, I agree that my child will obey the rules and regulations stated above under Rules and Regulations / Code of Conduct. Furthermore, I authorize the National Jazz Workshop to use and publish any photos that might be taken of my child during the course of the National Jazz Workshop.

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

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

# NJW REGISTRATION CHECK LIST

## All Applicants

- Registration Form (all applicants)
- Signed Code of Conduct Form
- Payment
- Acknowledgement of Risk Form

## Minor Applicants (those under 18 years of age)

- Pick-up Authorization Form

## Performance Track Participants ONLY

- Jazz Theory Textbook ***(this is required for ALL performance track participants)***  
*You do not need to purchase the book again if you purchased it at a previous NJW*

## Mail or e-mail all materials (with check or money order if applicable) to the following address:

Matt Niess, Director  
National Jazz Workshop  
P.O. Box 1029  
Fort Myer, VA 22211

Click E-mail Link  
[matt.niess@nationaljazzworkshop.org](mailto:matt.niess@nationaljazzworkshop.org)