TWENTY-THIRD ANNUAL
Marching "100" Summer Band Camp
(July 9 - 16, 2016)

INFORMATION PACKET

(REVISED APRIL 2016)
FLORIDA A&M UNIVERSITY
ADMINISTRATION

Elmina Mangum, Ph.D. – President
Marcella David – Provost & Vice President for Academic Affairs
Valencia Matthews, Ph.D. – Dean, College of Social Sciences, Arts and Humanities
Lindsey Sarjeant, Chairman, Department of Music
Phyllis Watson, Director of Continuing Education
Thomas Cavano, Ph.D., Al Lawson Multi-Purpose Center
Oscar Cromity, Director of Housing
Terrence Calloway, Director of Public Safety

BAND STAFF

Sylvester Young, Ph.D. – Director of Marching and Pep Bands
Shelby Chipman, Ph.D. – Director of Symphonic Band
Shaylor James, Ph.D. – Director of Percussion
Lindsey Sarjeant – Band Arranger
Longineu Parsons – Director of Trumpets and French Horns
Robert Griffin – Director of Trombones and Jazz Studies
Ralph Jean-Paul – Director of Euphonium and Tuba
Nicholas Thomas, Ph.D. – Director of Saxophones, Clarinets and Flutes
Auxiliary – T.B.A.
Donald Beckwith – Equipment Manager/Storekeeper
Kimberly Taylor – Office Manager
Deirdre McRoy – Music Compliance Officer
Joe Bullard – Band Announcer
Tony Leavell – Band Photographer
Tiffany Sholtz – President of Alumni Band Association
The Marching 100 Summer Band Camp Mission Statement

This year’s 2016 Summer Band Camp is dedicated to the many parents, guardians and friends who continue to support our Marching 100 Summer Band Camp for over 20 years. We appreciate your most kind generosity to ensure that students have an opportunity develop here on “The Highest of Seven Hills in Tallahassee.”

Developing student musicianship, enhancement of skills, encouraging creativity, and having fun are all part of the Florida A&M University Marching “100” Summer Band Camp. This special gathering of high school and middle school musicians from all over the country has attracted over 500 campers annually. It is one of the most comprehensive camps in the country. This camp instill traditional marching band concepts while helping advance the development of the campers in their leadership, drum major poise, auxiliary creativity and provide opportunities for students to perform in symphonic, jazz, chamber music, theory, piano, and electronic music settings. There are awards given to campers for Good Citizenship, Outstanding Musicianship Achievement, Spirit and special categories. Students also have the pleasure of receiving awards from the National Band Association, William P. Foster Award and Julian E. White Award.

This fun-filled camp takes place in the Foster-Tanner Music Building complex. Students receive instruction from members of the Florida A&M University Band Staff, who have over 200 years combined teaching experience, as well as visiting high school and middle school directors.

We encourage parents, family and friends to continue to support the scholarship efforts that continue to foster elements that allow musicians to grow and we sincerely thank you for your continued support.

This week your children have exerted much effort in learning warm-up studies marching drills, concert ballads, a dance routine and memorized contemporary marching techniques to perfection. From all indications, the pre-game and halftime shows will be exciting and will provide a memorable experience that campers will take back to their respective schools. We encourage them to explore the teaching concepts and relate these ideas to achieving team goals back at their home schools.

Lastly, on behalf of our University President, Elmira Mangum, Ph.D.; our Provost, Marcella David; the Dean of the College of Social Sciences, Arts and Humanities, Valencia Matthews, Ph.D.; and the Director of our Summer Band Camp, Sylvester Young, Ph.D., we wish you safe travel to and from Tallahassee. For additional information on the FAMU Summer Band Camp visit the website, http://www.event.com/d/sfqcps4.

Sincerely,

Shelby R. Chipman
Shelby R. Chipman, Ph.D.
Band Camp Coordinator
TO: Florida A&M University Summer Band Camp Participants
FR: Dr. Sylvester Young, Summer Band Camp Director
RE: Information Packet

Enclosed are materials and instructions for the Summer Band Camp. Please read and follow all directions. **Please submit your deposit for the camp as soon as possible.** Plans are being made for an exciting and challenging week for all camp participants. Highlights of the camp will include:

I. **Festival Parade** - featuring Summer Band Camp, Phi Mu Alpha Sinfonia, Sigma Alpha Iota, FAMU Pep Band Sororities and Fraternities, cars, floats (FAMU Campus) on Thursday, July 14, 2016, at 2:00 p.m.

II. **Symphonic Concert** - featuring Summer Band Camp Symphonic Band and Jazz Band (Band Rehearsal Hall) on Friday, July 15, 2016 from 7:30 – 9:00 p.m.

III. **Marching Band Extravaganza** - Pre-game and half-time show by Summer Band Camp Band at Bragg Memorial Stadium on Saturday, July 16, 2016 at 10:00 a.m.

Parents are invited and encouraged to attend all closing activities on Thursday, July 14, 2016 - Saturday, July 16, 2016.

The schedule is very tight and does not allow time for off campus visits. Campers are reminded to follow all directions. **Any student found guilty of violating any rules and regulations will be immediately terminated from the camp. Parents/Guardians will be called to remove any camper who violates the rules and regulations of the camp.**

You will be supervised by a professional staff and counselors selected from the membership of the Marching "100". Each counselor will have fifteen (15) students under his/her supervision.

Check in time is from 9:00 a.m. to 4:00 p.m. on Saturday, July 9, 2016. Please report to the Cashier’s Office of Foote-Hilyer Administration Building for registration. **Do not report to the University before 9:00 a.m. on Saturday, July 9.** Remember to have all medical release forms completed and notarized prior to your arrival on campus.

Campers may check out after the concerts end (approximately 2:00 p.m.) on Saturday, July 16, 2016. All campers must be out of the dormitory by 5:00 p.m. Saturday, July 16, 2016.

**NOTE:** Auditions for Marching, Concert and Jazz Band positions will be held on Saturday, July 9, 2016, beginning at 9:00 a.m. and continuing throughout the day.

We look forward to having you in the Twenty-Third Annual Summer Marching Band Camp. Should you have any questions, please call Dr. Sylvester Young at (850) 599-8744.

**Please inform other interested students that there are a few spaces open. Deposits are still being accepted to reserve a space, however, all fees must be paid by June 24, 2016.**

Please call (850) 599-3024 if you have any problems.

/kt
BAND CAMP INFORMATION

(DORMITORY STUDENTS FEES) include instruction, registration, room, meals, recreations, insurance, I.D. card, camp shirt and camp hat.

MUSIC CAMP OFFERINGS

MUSIC ORGANIZATIONS
The music organizations are the marching band, symphonic band, jazz band and ensembles. All music campers must participate with groups, as assigned.

RECREATION
Student personnel supervise the recreation program.

DORMITORIES AND DINING HALLS
The regular university dormitories and dining halls are used by music-campers. Each dormitory is staffed with trained counselors and dormitory facilities including recreation space and beautiful parlors. All meals are planned and prepared by trained dietitians.

BAND
The Summer Session Band presents a concert and two (2) marching exhibitions during the music camp.

STUDENT RECITALS AND OTHER MUSICAL ACTIVITIES
Each music camper is encouraged to perform on the ensemble concert. Please bring any solo that you have played in district or state festivals.

MEDALS FOR GOOD CITIZENSHIP AT MUSIC CAMP
Music camp is not only a very special opportunity to study music with specialists in the field, but it brings together the finest young boys and girls for an experience in cooperative living in an atmosphere of culture.

Citizenship is considered extremely important. Special recognition and awards are given to those music campers who display outstanding citizenship. The counselors and faculty make selection of awards winners.

AWARD FOR OUTSTANDING MUSICIANSHP
A special framed award is given to those students who in the opinion of the Department of Music faculty have demonstrated superior musicianship while studying at the Summer Music Camp.

AWARDS

FAMU ACHIEVEMENT AWARD
A full scholarship will be awarded to the 2017 band camp member who most exemplifies the spirit and talent of the 2016 Band Camp. The winner will be determined by the band staff and awarded at the final concert.

CHARTER MEMBER SCHOLARSHIP
Created and funded by Mrs. Zaheerah Shakir in honor of students from the original band camp. The scholarship is also funded by Mr. Freddie Pittman.

FAMU SPIRIT AWARD
This award is presented to a member of the band who displays the personality and spirit of the group -- as determined by a vote of the Summer Band Camp students.

WILLIAM P. FOSTER - Director of Bands Emeritus Trophy
Dr. Sylvester Young will present a trophy to a camp member selected by the music staff. The recipient of this award will be announced at the final concert.
CRITERIA FOR THE AWARD
The recipient of the award will be a camper who:
• Demonstrates a consistent, positive attitude and outstanding effort during all musical and marching rehearsals;
• Is punctual and prepared on a daily basis;
• Offers complete cooperation and assistance to the director, music staff, counselors and fellow band members;
• Exemplifies the highest level of enthusiasm, motivation and commitment to musical excellence as a member of the 2016 Florida A&M University Marching "100".

AUXILIARY AWARDS

Most Outstanding MAJORETTE
(individual and squad)

Most Outstanding FLAG
(individual and squad)

Most Outstanding DRUM MAJOR

NATIONAL AWARDS

National Band Association Awards for Outstanding musicianship.

Phi Mu Alpha Sinfonia award for outstanding musicianship

SECTIONAL AWARDS

Best MARCHING SECTION
Best PLAYING SECTION
Best DANCING SECTION
Best OVERALL SECTION
Visiting Schools ATTENDANCE AWARD
SATURDAY, JULY 9, 2016
9:00 - 4:00 PM
Band members begin to arrive at FAMU (850) 599-3024. Upon arriving to campus, please report immediately to The registration desk that will be located in the FAMU Foote-Hilier Cashier’s Office (Room 09). Registration, Pay key deposit and Submit Medical Release forms, afterwards please processed in THIS ORDER ONLY:
- Dormitory Check-In
  - Males
  - Females
- Rattler Card (Student Services Center)
- Auditions (Foster-Tanner Music Building)

**Use Campus Map To Locate Buildings**

10:00 AM - 3:00 PM
Placement Auditions (Room numbers will be posted)
Jazz Band Auditions (Room 04 Band Room)
Dinner

4:00 PM - 5:45 PM
Orientation Meeting-Lee Hall or Band Rehearsal Hall
Full Band Music Rehearsal (Band Room)
(Bring your instruments/music)
Meeting in Dorms with dorm counselors.

6:00 PM
Dinner

6:00 PM - 8:30 PM
Placement Auditions
Jazz Band Auditions
Dinner

9:00 PM - 10:30 PM
Full Band Music Rehearsal (Band Room)
(Bring your instruments/music)

10:45 PM - 11:15 PM
Report to Dorms, shower, relax and get ready for early Start Monday morning.

11:30 PM
LIGHTS OUT!!!

SUNDAY, JULY 10, 2016
6:30 AM
Wake Up
Continental Breakfast (Provided by FAMU Alumni Band)

7:30 AM
Sectional Rehearsals
Brunch
Sectionals (Marching Band Music Only)

8:30 AM - 10:45 AM
Field Rehearsal - Marching Band Drill Field
Lunch

11:00 AM - 12:15 PM
Master Class rehearsals (Rooms will be posted)
Break

12:30 PM - 2:00 PM
Marching Band Music Rehearsal
Break
Symphonic and Reading band rehearsals

2:20 PM - 2:50 PM
Players not selected for a symphonic band will report to sectional rehearsal for marching band (MUSIC REVIEW).

3:00 PM - 5:30 PM
Sectional Rehearsals
Symphonic and Reading band rehearsals

3:00PM – 5:30 PM
Jazz band rehearsal (Room 03)
Dinner

6:00 PM - 7:30 PM
Band Director’s Clinic (Topic: Rehearsing the Marching Band Music)

6:30 PM - 7:30 PM
Field Rehearsal – Marching Band Drill Field

7:30 PM - 10:30 PM
Field Rehearsal – Marching Band Drill Field

11:30 PM
LIGHTS OUT!!!
<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>5:00 AM</td>
<td>Wake Up</td>
</tr>
<tr>
<td>6:00 AM - 7:15 AM</td>
<td>Breakfast</td>
</tr>
<tr>
<td>7:30 AM - 10:45 AM</td>
<td>Field Rehearsal – Marching Band Drill Field</td>
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<tr>
<td>11:00 AM - 12:15 PM</td>
<td>Lunch</td>
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<tr>
<td>12:30 PM - 2:30 PM</td>
<td>Senior and Graduate Orientation (Recital Hall)</td>
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<tr>
<td>12:30 PM - 2:00 PM</td>
<td>Master Class rehearsals (Rooms will be posted)</td>
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<tr>
<td>2:00 PM - 2:15 PM</td>
<td>Break</td>
</tr>
<tr>
<td>2:20 PM - 2:50 PM</td>
<td>Marching Band Music Rehearsal</td>
</tr>
<tr>
<td>3:00 PM - 5:30 PM</td>
<td>Symphonic and Reading band rehearsals</td>
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<tr>
<td>3:00PM - 5:30 PM</td>
<td>Players not selected for a symphonic band will report to sectional rehearsal for marching band (MUSIC REVIEW).</td>
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<tr>
<td>6:00 PM - 7:15 PM</td>
<td>Dinner</td>
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<tr>
<td>6:00 PM - 7:30 PM</td>
<td>Jazz band rehearsal</td>
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<tr>
<td>6:30 PM - 7:30 PM</td>
<td>Band Director's Conducting Clinic (Topic: Charting Your Marching Band Show)</td>
</tr>
<tr>
<td>7:30 PM - 10:00 PM</td>
<td>Field Rehearsal – Marching Band Drill Field</td>
</tr>
<tr>
<td>11:30 PM</td>
<td>LIGHTS OUT!!!</td>
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**THURSDAY, JULY 14, 2016**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>5:00 AM</td>
<td>Wake Up</td>
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<tr>
<td>6:00 AM - 7:15 AM</td>
<td>Breakfast</td>
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<tr>
<td>7:30 AM – 10:00 AM</td>
<td>Field Rehearsal – Marching Band Drill Field</td>
</tr>
<tr>
<td>9:00 AM – 10:00 AM</td>
<td>Directors Clinic (Arranging for your Band)</td>
</tr>
<tr>
<td>10:00 AM – 10:45 AM</td>
<td>Lunch</td>
</tr>
<tr>
<td>11:00 AM - 12:00 Noon</td>
<td>Break (Change into band camp shirt for parade)</td>
</tr>
<tr>
<td>12:15 PM</td>
<td>Report to Bragg Stadium for picture</td>
</tr>
<tr>
<td></td>
<td>(Marching “100” members included)</td>
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<tr>
<td>12:30 PM</td>
<td>Pictures in Bragg Stadium</td>
</tr>
<tr>
<td>1:30 PM</td>
<td>Report to paved parking lot of Bragg Stadium for parade</td>
</tr>
<tr>
<td>2:00 PM</td>
<td>Parade begins</td>
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<tr>
<td>4:00 PM - 6:30 PM</td>
<td>Be-In/Out-Day</td>
</tr>
<tr>
<td>6:30 PM - 7:15 PM</td>
<td>Change, prepare for field rehearsal</td>
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<tr>
<td>7:30 PM - 11:00 PM</td>
<td>Field Rehearsal – Marching Band Drill Field</td>
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<tr>
<td>11:30 PM</td>
<td>Clean your room and pack your bags. LIGHTS OUT!!!</td>
</tr>
</tbody>
</table>

**FRIDAY, JULY 15, 2016**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>5:00 AM</td>
<td>Wake Up</td>
</tr>
<tr>
<td>6:00 AM - 7:15 AM</td>
<td>Breakfast</td>
</tr>
<tr>
<td>7:30 AM – 11:00 AM</td>
<td>Field Rehearsal – Marching Band Drill Field</td>
</tr>
<tr>
<td>11:15 AM – 12:30 PM</td>
<td>Box Lunches issued (Band Room)</td>
</tr>
<tr>
<td>12:30 PM – 1:30 PM</td>
<td>Special Video Presentation</td>
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<tr>
<td>1:30 PM – 3:30 PM</td>
<td>Symphonic band rehearsal</td>
</tr>
<tr>
<td>3:30 PM - 5:30 PM</td>
<td>All Other Campers are to report to Lee Hall Auditorium for Marching Band Music Review</td>
</tr>
<tr>
<td></td>
<td>Change into Concert Attire</td>
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</tbody>
</table>
6:00 PM – 7:15 PM Dinner
7:15 PM – 7:30 PM Setup and prepare for symphonic concert
7:30 PM – 9:00 PM Symphonic Concert – Band Rehearsal Hall - Required Attendance
* Attire: White shirts or blouses and Dark trousers or skirts.

ALL FLORIDA A&M UNIVERSITY OWNED SYMPHONIC EQUIPMENT MUST BE TURNED IN TO MR. DONALD BECKWITH FOLLOWING THE PERFORMANCE IN LEE HALL AUDITORIUM!!!

9:30 PM – 10:30 PM Marching Band Rehearsal (Music Only) Band Room
**LIGHTS OUT!!!**

SATURDAY, JULY 16, 2016
6:00 AM Wake Up
7:00 AM Breakfast
8:30 AM Pack and prepare for departure
9:00 AM Report to Foster-Tanner Band Room in your camp uniform
A. Warm up and tuning
B. Music run through

9:45 AM Line up in formation for departure for Bragg Stadium
10:00 AM Pre-game
10:30 AM Presentations and Awards
11:00 AM Half Time
12:00 PM Check in all school owned instruments, check out of rooms, and return keys. ALL FLORIDA A&M UNIVERSITY OWNED MARCHING BAND EQUIPMENT MUST BE TURNED IN TO MR. DONALD BECKWITH FOLLOWING THE PERFORMANCE IN BRAGG STADIUM!!!

2:00 PM End of Camp

HAVE A GREAT SUMMER!!!

The 2017 Marching “100” Summer Band Camp is Tentatively Scheduled for July 8 – 15, 2017
Twenty-Fourth Annual Florida A&M University Marching "100 Band Camp

First Day Schedule

July 9, 2016
9:00 - 3:00 p.m.
Registration & Audition (FHAC Room 09), Check in dormitory. Audition rooms will be posted.
A. Upon arrival, report to Foote-Hilyer Administration Bldg. for registration.
B. Check into dormitories (DO NOT UNPACK).
C. Meet in the male or female dormitory lobby to walk to the administrative building to have photograph identification cards made.

NOTE: Euphonium and Percussion players MUST bring their own instruments. Upon completion of registration, report to directors in respective rooms for auditions.

4:00 p.m. Dinner in the University Dining Hall.
6:00 p.m. Orientation Meeting
A. Introduction of Administrative and University Staff
B. Introduction of Staff and Campers
C. Introduction of Dance Routine

8:00 p.m. Full Band Music Rehearsal in Band Room
10:00 p.m. Rehearsal Ends

*** ALL CAMPERS MUST WEAR I.D. BADGES AT ALL TIMES. YOU WILL BE ISSUED A BOOK OF MEAL TICKETS AFTER REGISTRATION.

WE DO NOT FURNISH ANY MARCHING BAND INSTRUMENTS DURING CAMP.
Florida A&M University
Marching “100” Summer Band Camp

First Day Flow Chart
Registration Process

WELCOME: CAMPERS, PARENTS & FRIENDS

STATION 1
A. REGISTRATION AREA–(9:00 AM – 4:00 PM) - G-9 Foote-Hilyer Administration Bldg.
   a. Registration
   b. Key Deposit
   c. Information Table
   d. Talent Showcase sign-up (optional)

After completing registration, students will receive a YELLOW PASS to proceed to complete
DORMS:

STATION 2
A. DORMS
   1. Upon arriving at the Dorms, students must have:
      i. YELLOW PASS to receive a room assignment
      ii. A key deposit receipt

After completing housing, students should receive an ORANGE PASS to proceed to the Rattler
Card Office to have their ID picture taken.

STATION 3
A. PHOTO (Rattler Card Office located in dining hall building, see escorts)
   1. Upon arriving to the PHOTO ID area, students must have ORANGE PASS
      from Rattler Card.

After completing ID pictures, students should receive a PURPLE PASS to proceed to the audition
area.

STATION 4
A. MEDICAL RELEASE NOTARIZATION, IF NEEDED – Band Room

After notarization, IF NEEDED, students will proceed to the Audition area.

OR

STATION 5
A. Auditions (see room assignments posted on bulletin boards) - REQUIRED FOR
   ALL CAMPERS
   1. After completing Auditions, students will receive a GREEN PASS for dinner.

After completing all stations, students should report to assigned dormitory rooms and unpack
luggage until dinner at 4:00PM.

Following DINNER, students should report to Lee Hall for the Orientation promptly at 5:15 PM.
(Bring your INSTRUMENT & Music to the Orientation).
ATTENTION

SUMMER BAND CAMPERS

To Insure The Safety of Our Participants, Please Be Aware That Your Automobiles Will Not Be Allowed On Campus This Year.
BAND CAMP PARTICIPANTS

Plans have been finalized for the Florida A&M University's Annual Summer Band Camp to be held July 9 - 16, 2016. Over two hundred students registered in 2015. Please note that many students are sponsored by churches, civic organizations, fraternities, sororities, band boosters and local businesses. It may be helpful to inquire.

Should you have any questions, contact:
   Dr. Sylvester Young
   Director of Bands
   Florida A&M University
   Tallahassee, Florida 32307
   (850) 599-3024

NOTE: WE HAVE BEEN INFORMED THAT STUDENTS SHOULD BRING THEIR OWN COAT HANGERS AND PILLOWS WITH THEM FOR THE DORMS. ALSO, ID BADGES MUST BE WORN AT ALL TIMES. THIS IS MANDATORY FOR THE CAMPERS THIS YEAR.

** If you plan to attend but cannot pay the registration fee at this time, you may forward your camp application along with a brief letter stating when payment will be made.
Florida A&M University – Medical Consent and Liability Release

This is a legal and binding agreement which, when signed, will permanently limit your ability to recover from the parties indicated below for injuries or losses you may sustain as a result of participation in the Florida A&M University Band Programs and/or related activities.

References to Florida A&M University (henceforth referred as FAMU) include Florida A&M University, acting by and through its Board of Trustees, the Florida Board of Governors, the State of Florida, its agents, officers, faculty and employees.

PLEASE READ CAREFULLY

MEDICAL CONSENT FORM

I hereby grant permission for emergency medical service to be rendered as deemed necessary to my child (or myself). I do hereby voluntarily consent and authorize FAMU, in the event of an accident, illness or injury to take whatever measures and actions considered necessary and warranted under the circumstances to protect, safeguard and minimize further injury, health and safety. I understand that such actions may involve or require placement in a hospital or another medical facility for services and treatment. Any transportation expenses by any mode will be a debt and liability for which I accept total responsibility.

I hereby further declare, represent and agree, that in the event that FAMU has to exercise the above voluntarily given medical authorization and consent, that I hold harmless, release and forever discharge FAMU from any and all liability, damages, claims and demands whatsoever, including attorneys fees and court cost, which the undersigned, any heir or assigned has made.

Finally, I hereby declare and represent that I have read this statement, understood its contents, execute it of my free will and choice, and agree to be legally bound by it.

Initial ____________________ CONTINUE WITH NEXT SECTION

LIABILITY RELEASE

By signing this MEDICAL CONSENT and LIABILITY RELEASE, I assume any and all liability for any accident, injury, illness, damages or loss that may occur during participation or as a result of participation in the band programs and/or related activities at FAMU.

In consideration for the acceptance into or voluntary participation in the above stated activity/program, I/We hereby release, waive and discharge any and all demands and claims for, but not limited to, damages, personal injury, property damage, illness, death or loss which I may have or which hereafter accrue to me, against FAMU due to participation in or as a result of the above mentioned activity/program. This release will discharge and hold FAMU harmless from and against any and all liability and demands (including attorney fees and court cost) arising out of or connected in any way with participation in or as a result of the above-mentioned activity/program, even though that liability may arise out of negligence on the part of persons or agencies mentioned above.

I/We further understand that damages, accidents, injuries or death could arise out of participation or as a result of the above-mentioned activity/program. Knowing this, I hereby agree to assume those risks and to release and hold all agencies and persons mentioned above harmless who (through negligence or carelessness) might otherwise be liable to me.
I/We fully understand and agree this disclaimer, release, waiver and assumption of risk, is to be binding on my heirs and assigns.

I HAVE READ THIS ENTIRE RELEASE. I FULLY UNDERSTAND IT AND AGREE TO BE LEGALLY BOUND BY IT.

Print Name of Minor or Participant (if under 18 years olds) ____________________________

Print Name of Parent, Legal Guardian or Custodian ____________________________

Print Name of Participant (if 18 years old or older) ____________________________

Signature of Parent, Legal Guardian or Custodian ____________________________ Date ________________

Signature of Participant (if 18 years or older) ____________________________ Date ________________

Address ________________________________________________________________

Phone Number (s) ____________________________________________________________

Sworn to and subscribed before me this _______ day of _______________ 20 _______.

Notary Public ____________________________ -SEAL-

My Commission Expires: ____________________________
FLORIDA A&M UNIVERSITY
NON-STUDENT CONSENT FORM

READ THE FOLLOWING INFORMATION CAREFULLY:

1. I hereby grant permission to the University Approved Healthcare Facility medical staff to render care to me upon my request.

2. I understand that the University Approved Healthcare Facility is provided to treat students enrolled at the university and any care given to me is provided as an emergency or on a fee for service(s) basis.

3. In case of an emergency, I would like for you to notify:

________________________________________________________________________

Relationship to you: ________________________________

Business Telephone number: (     ) __________________________

Home Telephone number: (     ) __________________________

Address: _______________________________________________________________

City: _____________________ State: ________ Zip: ________________

4. I CERTIFY THAT: I have read the contents of this form and that all information provided is correct. I will not hold any member of the medical staff responsible for follow-up care, referrals, drug reaction or other complications from treatment.

SIGNATURE: ______________________________________  DATE: ___________________

WITNESS: _________________________________________  DATE: ___________________

FILE: CONSENT

03/06
NON-STUDENT MEDICAL RECORDS RELEASE AUTHORIZATION

I, __________________________________________, hereby authorize the Florida A&M University Approved Healthcare Facility to release the medical records of my son/daughter and provide verbal information from said records for review and inspection by or inquiries from the local hospital and/or medical facility.

By granting this release, I hereby hold harmless the Florida A&M University Approved Healthcare Facility and its employees, the Florida A&M University, the Florida A&M University Board of Trustees, the Florida Board of Governors and the State of Florida from any claims or suits arising out of this authorization.

This authorization to release the record of my son/daughter expires on:
_________________________________________ 20 ________.

___________________________________ sworn to and subscribed before me this ___
NAME OF STUDENT  day of _________________________, 20 ______

___________________________________
SOCIAL SECURITY NUMBER  NOTARY PUBLIC

___________________________________ MY COMMISSION EXPIRES: ____________
PARENT/GUARDIAN SIGNATURE  -SEAL-
FAMU Summer Camp Medical History

The purpose of this form is to provide camp staff with information regarding your child’s/Participant’s current health status. This form is required for treatment if the participant should become ill or injured while involved in a FAMU summer camp program.

**GENERAL INFORMATION**

<table>
<thead>
<tr>
<th>Name of Participant</th>
<th>Age</th>
<th>Date of Birth</th>
<th>Gender</th>
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<thead>
<tr>
<th>Home Street Address (include City, State and zip code)</th>
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<table>
<thead>
<tr>
<th>Emergency Contact</th>
<th>Relationship</th>
<th>Phone # (home)</th>
<th>Phone # (cell)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Physician’s Name</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ALLERGIES**

Please list all allergies to medications, food, insect bites/stings, animals, plants, other, etc. Include the type of reaction and severity and recommended treatment. Please use additional pages if necessary.

<table>
<thead>
<tr>
<th>Allergy</th>
<th>Reaction/Severity</th>
<th>Recommended Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Does your Participant suffer from Anaphylaxis?  
   Yes  No  
   * Anaphylaxis is a severe allergic reaction marked by swelling of the throat, hives and trouble breathing

2. Does your Participant require an Epipen?  
   Yes  No

3. Does your Participant require an inhaler?  
   Yes  No

**MEDICAL CONDITIONS**

Please document any current medical conditions, chronic illness or other health concern that would be needed to assist the staff or medical personnel in an emergency situation. Include any restrictions on activities.

<table>
<thead>
<tr>
<th>Medical Condition</th>
<th>Effects/Restrictions/Precautions/Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MEDICATIONS**

List any medications your Participant currently takes; include the dosage schedule and any specific instructions for use. Also, please indicate (Yes/No) if the minor Participant is allowed to take their medication on their own or if it should be monitored by a camp counselor. This also includes any type of birth control.

<table>
<thead>
<tr>
<th>Medication</th>
<th>Purpose</th>
<th>Dose schedule</th>
<th>Specific Instructions</th>
<th>Self-Medicate (Yes/No)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Be sure to bring enough medication in sufficient quantities and in the original containers labeled with the Participant’s name and doctor’s contact information. Make sure they are not expired, including inhalers and EpiPens.*

4-2016 KT
Over-the-Counter Medications

My Participant has permission to take over-the-counter medications in case of accident, illness or injury. The camp is not responsible for providing any over-the-counter medications. Please check all that they have permission to take:

<table>
<thead>
<tr>
<th>Tylenol/Acetaminophen</th>
<th>Tums/Antacid</th>
<th>Special considerations or notes regarding over-the-counter medications:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ibuprofen (pain/swelling)</td>
<td>Imodium/anti-diarrhea</td>
<td></td>
</tr>
<tr>
<td>Benadryl/Antihistamine</td>
<td>Antibacterial gel/lotion</td>
<td></td>
</tr>
<tr>
<td>Robitussin/Expectorant</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Sudafed/Decongestant</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Pepto Bismol</td>
<td>Skin Ointments (in case of rash, antibacterial, athlete’s foot, etc.</td>
<td></td>
</tr>
</tbody>
</table>

NUTRITION

Does your Participant have any special dietary requirements or regime to be followed? Yes  No
If yes, please explain: ____________________________________________

IMMUNIZATIONS

Has your Participant received the following vaccines?

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Date(s) of Immunization</th>
</tr>
</thead>
<tbody>
<tr>
<td>MMR (2 shots are required)</td>
<td></td>
</tr>
<tr>
<td>Tetanus</td>
<td></td>
</tr>
</tbody>
</table>

HEALTH INSURANCE INFORMATION

Providing this information does not guarantee payment of your claim by your insurance company. You are responsible for any charges for services rendered. Attach a copy of the front and back of your insurance card.

<table>
<thead>
<tr>
<th>Policy Holder’s Name</th>
<th>Name of Insurance Carrier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy #</td>
<td>Group #</td>
</tr>
<tr>
<td>Insurance Company Address (street, city, state, zip)</td>
<td>Telephone Number</td>
</tr>
</tbody>
</table>

Health Information Privacy Statement and Authorization

The FAMU Summer Camp Medical History Form is for health care concerns for minors attending a FAMU sponsored camp/activity. All records will be handled by staff/volunteers whose job includes processing or using this information for the benefit of the participant. Minimal necessary information may be shared with program staff to provide adequate participant safety and health care. Access to this information will be limited, but copies may be requested by the camp sponsor, by the participant or their legal representative. In the case of illness, injury or emergency, I understand that efforts will be made to contact the individual listed as the emergency contact by camp personnel. Medical providers are authorized to disclose protected health information to the adult in charge, camp management and/or to any health care provider involved in providing care to my Participant. I have read the above procedures for handling the health and medical information and agree to the release of any records necessary for treatment, referral, billing, insurance purposes and ongoing care.

I attest that the information I have provided in the FAMU Summer Camp Medical History Form is complete and accurate. I am aware of and accept the risks inherent in program activities and my Participant has permission to engage in all prescribed activities, except as noted by me, ________________________ (Participant’s name) has my permission to receive medical attention in the event of illness, injury or medical emergency while participating in the FAMU summer camp program. I will assume the financial responsibility for any cost of health care for my Participant that may occur during this camp. I agree to hold harmless, defend and indemnify the FAMU Board of Trustees, FAMU their officers, agents, and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred or required arising out of the actions of my Participant in the course of the event/camp.

Signature of Parent/Guardian: ________________________________

Date: ____________________