

THE NATIONAL CIVIL WAR FIELD MUSIC SCHOOL

30 November 2009

Dear Field Musician,

Thank you for your interest in the third annual National Civil War Field Music School, which will take place June 11-13, 2010 at Pamplin Historical Park near Petersburg, VA. Along with this letter you will find registration forms for the School. We encourage you to register early and begin utilizing the musical resources we will provide to help you prepare for your experience at the School. These resources and a welcome packet with much information about what to bring and what to expect will be posted on our website at www.nationalcivilwarfieldmusicschool.com.

The National Association for Civil War Brass Music, Inc. is committed to educating musicians seeking to re-create the roles of bandsmen and field musicians of the Civil War era in the arena of living history. Over the course of the weekend you will receive approximately 12 hours of musical instruction and military drill. We have put together an outstanding team of musical instructors and military re-enactors whose expertise, teaching skills, and standards for excellence are unsurpassed in their field. Music Director is Jari Villanueva, and Military Commander is Bill Watson. A complete list of faculty and staff will be posted on our website shortly, and will include many of those who led the 2008 and 2009 Schools.

Your registration fee includes tuition, housing, and five full Civil War-style meals. Registration fees are \$110 if postmarked by January 15, 2010, and \$125 if postmarked between January 16 and April 15, 2010. After April 15, the fee is \$140. An optional "box lunch" style dinner for Friday evening can be purchased for an additional \$9.25. Housing will be provided in reproduction "winter quarters" huts at the Hart Farm site at Pamplin Historical Park. Please see our website at www.nationalcivilwarfieldmusicschool.com for photos of this incredible site located on original Civil War battlefield ground. You can also see information on faculty, staff, and schedules from past Schools. The website will be updated throughout the spring with bios and photos of the musical faculty and military staff who will be leading your instruction, and more information about what the National Civil War Field Music School has to offer you.

If you have any questions, please contact us at fieldmusicschool@nationalcivilwarbrassmusic.org. We look forward to seeing you at Pamplin Historical Park in June!

Sincerely,

Jari Villanueva
Music Director

Bill Watson
Military Commander

THE NATIONAL ASSOCIATION FOR CIVIL WAR BRASS MUSIC, INC.
124 Maiden Choice Lane, Baltimore, MD 21228
(410) 744-7708
contact@nationalcivilwarbrassmusic.org
www.nationalcivilwarbrassmusic.org

Musician Registration Form (updated 11/30/09)
National Civil War Field Music School, June 11-13, 2010

Please print or type

Name _____

Male _____ Female _____

Age _____ Grade in School (if applicable) _____

Home Phone (____) _____

Work Phone (____) _____

Cell Phone (____) _____

Email Address _____

Mailing Address _____

Federal _____ Confederate _____ Civil War Reenacting Unit _____

Instrument _____ Years played _____ Teacher(s) _____

Musical Ability Rating

You will be re-evaluated by the music faculty when you arrive at the school, but please rate your own ability here (see information posted on our website for how to determine your level):

Beginner _____ Novice _____ Intermediate _____ Advanced _____

Photograph

Along with your application and fee, please submit a recent photograph of yourself in Civil War uniform. This photo will be used solely for the purpose of assisting the faculty and staff to match names with faces and will not be publicized. Photos may be submitted electronically as .JPG files by e-mailing to fieldmusicschool@nationalcivilwarbrassmusic.org. Note - if you included a photo with your application for the 2008 or 2009 School you do not need to submit another for 2010.

Cancellation Policy

If a cancellation is requested in writing prior to three weeks before the event, a non-refundable deposit of \$35.00 will be deducted, and the balance of the fees paid will be refunded. No refunds will be made for cancellations received within three weeks of the event; however, any fees above and beyond the non-refundable deposit of \$35.00 may be applied towards tuition for a future National Civil War Field Music School.

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Optional additional meal

Optional “box lunch” style supper for Friday, June 11 is \$9.25 and includes sandwich, chips, cookies, and bottled water. Suppers may be picked up at the registration table after 6:00 pm. Please indicate if you would like to add this meal and select your sandwich choice below.

Yes, I would like to order a “box lunch” style supper for Friday, June 11

No, I do not want to order this optional meal

Sandwich options – please circle the number of your choice:

- #1 Smoked turkey with provolone cheese, lettuce and tomato on a fresh roll, served with chips, cookies, and bottled water
- #2 Sugar-cured ham with Swiss cheese, lettuce and tomato on a fresh roll, served with chips, cookies, and bottled water
- #3 Italian sub with ham, turkey, salami and provolone cheese, lettuce, tomato, peppers and house vinaigrette, served with chips, cookies, and bottled water
- #4 Roast beef and cheddar cheese with onion, lettuce and tomato on a fresh roll, served with chips, cookies, and bottled water
- #5 Vegetarian choice: California pasta salad, tri-colored pasta combined with a garden of fresh vegetables and dressed with house vinaigrette on a bed of fresh greens. Served with assorted crackers, fruit cup, granola snack and bottled water

Registration Checklist

- Completed registration form
- Signed release form including medical and emergency contact information
(please select correct form based on age of registrant)
- Photograph (may be e-mailed)
- Registration Fee (includes tuition, housing, and five meals)
 - \$110.00 if postmarked by January 15, 2010
 - \$125.00 if postmarked by April 15, 2010
 - \$140.00 if after April 15, 2010
- Box supper order (optional)
- \$9.25 for Friday box supper if ordered (optional)

Amount Enclosed _____

Make checks payable to National Civil War Field Music School

Return completed and signed application and payment to: National Civil War Field Music School
124 Maiden Choice Lane
Baltimore, MD 21228

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Participant Release Form (for all participants over the age of 18)

I understand that there are risks involved in Civil War re-enacting and that injuries can result, and I fully accept these risks. I understand that the National Civil War Field Music School, School faculty and staff, Pamplin Historical Park, and Park personnel are not responsible for theft, damage to personal property, or injury. I hereby release the National Civil War Field Music School, School faculty and staff, Pamplin Historical Park, Park personnel, and their agents, from any and all liability for damage or loss, loss of personal property, or injury, and I accept the full responsibility for any such damage, loss, or injury that may result from my participation in the School. I accept the non-refundable deposit policy described on the application form. I understand that the use of alcohol or drugs in any form is prohibited for all participants, and that violation of this policy will result in immediate expulsion from the School. I further understand that smoking by participants under the age of 18 is not allowed. I give permission for photos, video, and/or recordings of my participation at the School to be published or used in promotional materials or publicity for the School or Pamplin Historical Park. I understand that no royalty or compensation will be due me if any photo, video, or recording in which I appear is used for any purpose. I have received and read the Rules and Regulations pertaining to firearms and I agree to abide by these rules and to follow all instructions from School staff and Park personnel regarding firearms safety.

Signature: _____

Printed Name: _____

Date: _____

Medical Information

Insurance Company: _____

Policy Holder's Name: _____

Insurance Policy Number: _____

Allergies: _____

Medications: _____

Special Needs: _____

Person to contact in case of emergency

Name _____ Relationship _____

Phone number _____ Alternate phone number _____

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Participant Parental Permission and Release Form (for all participants under 18)

I give my permission for my son/daughter, _____, to participate in the National Civil War Field Music School. I understand that there are risks involved in Civil War reenacting and that injuries can result. I fully accept these risks for my child. I understand that the National Civil War Field Music School, Faculty and Staff, and Pamplin Historical Park personnel are not responsible for theft, damage to personal property, or injury. I hereby release the National Civil War Field Music School, School faculty and staff, Pamplin Historical Park, Park personnel, and their agents, from any and all liability for damage or loss or loss of personal property, or injury to my child, and I accept, for myself and my child, the full responsibility for any such damage, loss, or injury that may result. I accept the non-refundable deposit policy described on the application form. I understand that the use of alcohol or drugs in any form is prohibited for all participants, and that violation of this policy will result in immediate expulsion from the School. I further understand that smoking by participants under the age of 18 is not allowed. I give permission for photos, video, and/or recordings of my child’s participation at the School to be published or used in promotional materials or publicity for the School or Pamplin Historical Park. I understand that no royalty or compensation will be due me or my child if any photo, video, or recording in which my child appears is used for any purpose. In case of emergency, injury, or illness, the senior staff member has my permission to secure any emergency medical care deemed necessary by a licensed physician for my child. Any allergies, medications, dietary restrictions, or special needs have been noted on this form. I hereby certify that my child has received and read the Rules and Regulations pertaining to firearms and agrees to abide by these rules and to follow all instructions from School staff and Park personnel regarding firearms safety.

Parent/Guardian Signature: _____

Relation: _____ Date: _____

Medical Information

Insurance Company: _____

Policy Holder’s Name: _____

Insurance Policy Number: _____

Allergies: _____

Medications: _____

Special Needs: _____

Person to contact in case of emergency

Name _____ Relationship _____

Phone number _____ Alternate phone number _____

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