

THE NATIONAL CIVIL WAR FIELD MUSIC SCHOOL

5 January, 2012

Dear Field Musician,

Thank you for your interest in the fifth annual National Civil War Field Music School, which will take place June 8-10, 2012 at Holcombe-Jimison Farmstead Museum (www.holcombe-jimison.org) near Lambertville, NJ, in conjunction with the Lambertville Living History Association (www.lambertvillecivilwarreenactment.com). 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. A complete list of faculty and staff will be posted on our website shortly, and will include many of those who led the previous Schools.

Your registration fee includes tuition, housing, and five full Civil War-style meals. Registration fees are \$110 if postmarked by February 1, 2012, and \$125 if postmarked between February 2 and April 15, 2012. After April 15, the fee is \$140. Housing will be provided at the Farmstead.

Please see our website at www.nationalcivilwarfieldmusicschool.com for 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 nationalfms@gmail.com. We look forward to seeing you at the Holcombe-Jimison Farmstead Museum in June!

Sincerely,

Les Salsbury
School Director

Musician Registration Form (updated 1/5/2012)
National Civil War Field Music School, June 8-10, 2012

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 nationalfms@gmail.com. Note - if you included a photo with your application for previous Schools you do not need to submit another for 2012.

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.

Registration Checklist

- _____ Completed registration form including medical and emergency contact information
- _____ Signed release form (please select correct form based on age of registrant)
- _____ Photograph (may be e-mailed to DHeminitz@gmail.com)
- _____ Registration Fee (includes tuition, housing, and five meals)
 - \$110.00 if postmarked by February 1, 2012
 - \$125.00 if postmarked by April 15, 2012
 - \$140.00 if after April 15, 2012

Amount Enclosed _____

Make checks payable to National Civil War Field Music School

Return completed and signed application and payment to:

Donald G. Heminitz,
930 Long Pond Rd,
Plymouth, MA 02360

Medical Information

Insurance Company: _____

Policy Holder's Name: _____

Insurance Policy Number: _____

Allergies: _____

Medications: _____

Dietary Restrictions: _____

Special Needs: _____

Person to contact in case of emergency:

Name: _____

Relationship: _____

Phone number: _____

Alternate phone number: _____

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, Holcombe-Jimison Farmstead Museum, and Farmstead personnel are not responsible for theft, damage to personal property, or injury. I hereby release the National Association for Civil War Brass Music, the National Civil War Field Music School, School faculty and staff, Holcombe-Jimison Farmstead Museum, Farmstead 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 Holcombe-Jimison Farmstead Museum. 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: _____

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 re-enacting 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 Holcombe-Jimison Farmstead Museum personnel are not responsible for theft, damage to personal property, or injury. I hereby release the National Association for Civil War Brass Music, the National Civil War Field Music School, School faculty and staff, Holcombe-Jimison Farmstead Museum, Farmstead 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 Holcombe-Jimison Farmstead Museum. 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: _____

Printed Name: _____

Relation: _____

Date: _____