

2018 WOTFA FIDDLE CAMP ENROLLMENT FORM

The Fiddle Camp will be held July 16 through July 20, 2018.

You may complete this form right on your computer, print it, and mail it! Please answer ALL questions (required); if you are writing by hand, please print LEGIBLY-especially your E-Mail Address!

Please enter a **FIRST CHOICE or AM CLASS** and a **SECOND CHOICE or PM CLASS** *and* instructor. This is important in the event we're not able to place you in your first choice class. If you provide us with a second choice - if that class is open—we'll place you in it. Otherwise we'll place you on the Wait List and void your check if you don't get in.

FIRST CHOICE/AM CLASS _____

SECOND CHOICE/PM CLASS _____

Would you like to teach a Mini Workshop? _____

- \$75.00 - **Youth** member (17 and under)
- \$175.00 - **Adult** member

MAKE CHECKS PAYABLE TO: WOTFA

SEND FORM AND CHECK TO: CORRINE JUDD 1108 N. WILLOW RD. SPOKANE VALLEY, WA 99206

PLEASE READ CAREFULLY: Enrollment must be postmarked **NO EARLIER THAN THE FIRST MONDAY IN APRIL (April 2nd this year)**. Applications postmarked before the first Monday in April **WILL BE RETURNED**. Applications received on or after this date will be accepted in *order of postmark date*. **One enrollment form per person**, but multiple forms in the same envelope are okay.

NAME _____ DIST # _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

TELEPHONE _____ E-MAIL: _____

CELL PH _____ (this is very helpful when you are in route *and* at the Fiddle Camp)

If you are accepted, will you be attending on a district scholarship? Yes _____ No _____
Or a private scholarship? Yes _____ No _____

Please check one: Adult _____ Youth _____ (17 and under) **Age of youth** _____ (required)

(Please have parent sign release below if you are under 18.)

Are you camping? (Circle) No Yes If yes: Tent _____ RV _____ (how long is rig?) _____

Motel? Name of Motel _____ Other _____

Please name other family members applying for the Fiddle Camp _____

By my signature, I agree that all recordings, photos and video made by Fiddle Camp personnel, in which I am involved, are reserved by, and shall become the property of WOTFA, and may be used by the Association for promotion, publicity, or any other purposes within the scope of the WOTFA overall mission and purpose.

Name (**print legibly**) _____ Date _____

Signature _____ Parent Signature _____

(REQUIRED IF APPLICANT IS UNDER 18)