### RSCM-2013 Carolina Course for Girls and Adults July 8-14, 2013

Dear Staff Member:

Included in this packet are the forms required for **ALL** staff to fill out and send in for the RSCM-2013 Carolina Course for Girls & Adults to be held July 8-14, 2013.

#### Please fill out all forms and send them to the course registrar:

Marilyn Neely 1765 W Pennsylvania Ave Southern Pines NC 28387

registrar@carolinarscm.org

**The Self Declaration needs to be filled out each year**; however the reference forms are valid for three (3) years. So if we already have them on file for you from 2012 or 2011 you do not need to complete them for 2013.

The two reference forms need to be given to the appropriate people with an envelope addressed to the registrar at the above address.

If you have any questions, please do not hesitate to contact me.

We look forward to having you with us this summer for a week of music and fun!

Marilyn Neely Registrar

### **RSCM-2013 Carolina Course for Girls and Adults** July 8-14, 2013

### **Staff Registration**

Name:			
Last	First	Middle	What you wish to be called
Address:			
Phone <u>:</u> Home	/ cell		Email address
			Linan address
Emergency Contact:Nan	1e	Phone N	lumbers
Special dietary needs o	r medical concern	S:	
Which part are you able to	sing? AltoTe	enor Bass	(Adult women sing Alto)
T-Shirt Size:			
Church Name and Address	:		
Choir Director:	Pho	ne:E	Email:
To the Course Manager: in our choir, that s/he work recommendation of his/he	ks appropriately with	children and youth,	sted above is in good standing and that s/he has the
Choir Director	Date	Minister	Date
			have two reference forms or 2013. Room and board,

T-shirt, and music are provided.

Mail to:

Marilyn Neely, Registrar 1765 W Pennsylvania Avenue Southern Pines NC 28387



3) Dates:

# Self-Declaration Form for Adult Participants & Staff attending RSCM – America Courses/Events for Young People under 18

1. Title & Full Name:	
2. Address:	
-	Zip Code:
Tel. No. (Home):	(Work):
3. Date of birth://	
4. How long have you lived at the above address	?
If less than 12 months please give the following in	nformation:
Previous Address:	
How long there:	
5. Where are you currently employed?	
How long	
you for at least two years and who will provide a or a family member). Included are two reference	people, one clergy and one lay, who have known personal reference. (Do not use the Course Manager forms for which you provide a stamped envelope those to your references and ask them to send them
A	B
Zip Code	Zip Code
•	•
Tel.#	Tel. #
7. RSCM EVENTS / ACTIVITIES Please list your prior RSCM course experience 1) Dates: 2) Dates:	

8. Have you taken the Safe Church/Sexual Ethics Training provided by your diocese or denomination? Yes No Where?
Please enclose a copy of your certificate of attendance.
9. Have you ever had a background check? (age 18 years and older)
If so, when and where
10. Do we have your permission to run a background check? Yes No
CONFIDENTIAL
11. DECLARATION
We, who administer courses in the training of youth and adults through the Royal School of Church Music in America, are committed to the safety of all involved. In addition to providing musical and spiritual instruction of the highest available caliber, we intend to safeguard the physical, mental, spiritual, and emotional stability of participants and staff while under our supervision. You are therefore requested to provide the following information.
Have you ever been convicted of a criminal offense? $\Box Yes  \Box No$
Have you ever been found by a civil court to have caused significant harm to a child or young person under the age of 18, or has any civil court made any finding against you that any child or young person under the age of 18 was at risk of significant harm?  □Yes □No
Declaration Statement:
I declare that all the information I have provided is true and complete to the best of my knowledge.
Signed:
Name (please print):
Date:
Please return this form to the Course/Event Manager.



### **Adult Participant & Staff Reference Form for Summer Courses**

Dear Sir or Madam:			
is registering to attend one of the Summer Courses sponsored by the Royal School of Church Music in America. These summer courses provide a place where people can share in the joy of community, the thrill of musical growth, and the peace of renewal. We who administer these courses are committed to the safety of all involved. In addition to providing musical and spiritual instruction of the highest available caliber, we intend to safeguard the physical, mental, spiritual, and emotional stability of participants and staff while under our supervision.			
To that end, we ask you to provide the following information regarding this person. Kindly send it in the enclosed envelope directly to the Course Manager. Please know that all information will be kept securely and in strict confidence. We are grateful to you for your assistance to us in this matter.			
Sincerely,			
RSCM America Board of Directors			
How do you know this person?			
How long have you known this person?			
In what capacity have you seen this person interacting with children or youth?			
Would you trust this person to interact with children and youth?			
Is there anything you know about this individual that would make it inappropriate for him/her to be present with children and youth?			

Do you have any knowledge that this person has been convicted of a criminal offense?
☐ Yes ☐ No
To your knowledge has this person ever been found by a civil court to have caused significant harm to a child or young person under the age of 18, or has any civil court made any finding against him/her that any child or young person under the age of 18 was at risk of significant harm?
☐ Yes ☐ No
Signed:
Name (please print):
Date:



### **Adult Participant & Staff Reference Form for Summer Courses**

Dear Sir or Madam:			
is registering to attend one of the Summer Courses sponsored by the Royal School of Church Music in America. These summer courses provide a place where people can share in the joy of community, the thrill of musical growth, and the peace of renewal. We who administer these courses are committed to the safety of all involved. In addition to providing musical and spiritual instruction of the highest available caliber, we intend to safeguard the physical, mental, spiritual, and emotional stability of participants and staff while under our supervision.			
To that end, we ask you to provide the following information regarding this person. Kindly send it in the enclosed envelope directly to the Course Manager. Please know that all information will be kept securely and in strict confidence. We are grateful to you for your assistance to us in this matter.			
Sincerely,			
RSCM America Board of Directors			
How do you know this person?			
How long have you known this person?			
In what capacity have you seen this person interacting with children or youth?			
Would you trust this person to interact with children and youth?			
Is there anything you know about this individual that would make it inappropriate for him/her to be present with children and youth?			

Do you have any knowledge that this person has been convicted of a criminal offense?
☐ Yes ☐ No
To your knowledge has this person ever been found by a civil court to have caused significant harm to a child or young person under the age of 18, or has any civil court made any finding against him/her that any child or young person under the age of 18 was at risk of significant harm?
☐ Yes ☐ No
Signed:
Name (please print):
Date:

## RSCM-2013 Carolina Course for Girls and Adults July 8-14, 2013

## Photo and Recording Release ADULT PARTICIPANT

I grant to the Episcopal Diocese of North Carolina, RSCM America, RSCM International and the RSCM Carolina Course for Girls and Adults - 2013 the right to take, copyright, and publish photographs, audio, or video footage of me in print and/or electronically. This release is also to include the websites and/or Facebook pages of said entities.

I agree that The Episcopal Diocese of North Carolina, RSCM America, RSCM International and RSCM – Carolina Course for Girls and Adults may use such photographs and recordings as publicity, or advertising to further their ministries and musical activities, and I waive any right to compensation, royalties, or ownership.

Adult Participant's name	
Signature	 Date

Please mail this form to: Marilyn Neely, Registrar 1765 W. Pennsylvania Avenue, Southern Pines, NC 28387

Participant's Name		
Please plan so you <b>Before 5 pm o</b>		-
Travel - Arrival to	and Departur	e from Course:
I will be arriving and departing by: Car	Plane:*	Other:
* <u>Arrival</u> : AirlineFlight #		ight #
Date:	Time:	
Participants will be met at baggage claim at	the <b>Raleigh-Durl</b>	nam International Airport (RDU)
* <u>Departure</u> : Airline	F	light #
Date:	Time:	
Please arrange airline departui from the Raleigh-Durh Room	-	onal Airport (RDU).
List your roommate choices below and we v	will attempt to assi	gn roommates accordingly.
Roommate Choice 1:	-	
Roommate Choice 2:		

Please mail this form to: Marilyn Neely, Registrar 1765 W. Pennsylvania Avenue, Southern Pines, NC 28387