

# Appleton Area School District

## SUMMER BAND CAMP 2024

For students entering their second year of playing through Grade 9

**Dates/Time:** July 29<sup>th</sup>- August 2<sup>nd</sup>, 2024 **Monday – Thursday** 8:30 am – 2:15 pm  
**Friday** 8:30am - 12:30pm

**Location:** Appleton North High School

**Fee:** \$20, payable on the portal or with the registration paperwork



### Student Eligibility & Registration Information:

- Students should have a minimum of one year of formal instruction on their instrument.
- Complete the Fox Valley Consortium Registration form on the reverse side (one per student)

### Registration may be conducted online this year!

Please see the following website for more information. [www.aasd.k12.wi.us/families/summer\\_school\\_information](http://www.aasd.k12.wi.us/families/summer_school_information)

**Current AASD students:** Parents/guardians will register for summer school courses via the Infinite Campus Portal. Course registration opens April 15<sup>th</sup>. Student's finalized schedules and fees will also be available for viewing in the Portal within one week after registering the student. Fees may be paid online, also through the portal. If assistance is needed logging on to Infinite Campus, please contact the Helpdesk at [helpdesk@asd.k12.wi.us](mailto:helpdesk@asd.k12.wi.us) or 920-852-5555 ext. 63519.

<https://appletonwi.infinitecampus.org/campus/portal/appleton.jsp>

**\*\*Out of district or private school students:** Please complete and return the form on reverse.

**Instructions regarding Lunch at Band Camp:** Students will have an opportunity to order Papa John's pizza for lunch Monday through Thursday. Students may also bring lunch with them. We will also have water and soda available for purchase each day.



If you do not wish to use the online registration process, please mail your completed registration form & check to:



Summer Band Camp Registration C/O Matt DiPietro  
225 N Badger Ave  
Appleton, WI 54914

Your registration must be postmarked on or before June 3<sup>rd</sup>, 2024  
NO REGISTRATIONS WILL BE ACCEPTED AFTER THAT DATE

Each student enrolled will receive an email in July with more details and schedules for band camp.

Band Camp Director:  
Matt DiPietro: email [dipietromatthe@asd.k12.wi.us](mailto:dipietromatthe@asd.k12.wi.us)



# Appleton Area School District Summer Band Camp Registration

**Please complete only if you are NOT using online registration!**

Student Name \_\_\_\_\_ Gender  M  F Date Of Birth \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

My child is currently attending \_\_\_\_\_ school. Grade next Fall \_\_\_\_\_

**In case of absence or emergency, the number to call *first* to contact a legal guardian between 8:30am-2:15pm is: \_\_\_\_\_.**

Parent/Guardian Name \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Does this student have an IEP, Building Intervention Plan, or 504 Plan?  Yes  No (If yes, please explain): \_\_\_\_\_

*According to WI Dept of Public Instruction, summer school classes are not tailored to implement a student's IEP.*

Special Health Concerns/Medical Diagnoses: \_\_\_\_\_

Will your child have medications at summer school? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please provide the name of the medication(s): \_\_\_\_\_

Reason for Medication(s) \_\_\_\_\_

Time(s) medication is administered: Routine/Daily \_\_\_\_\_

As Needed \_\_\_\_\_ Emergency \_\_\_\_\_

(Please bring any medications to the site coordinator on the first day of summer school.)

### Music History

Main Instrument played: \_\_\_\_\_ Number of years of formal instruction: \_\_\_\_\_

T-Shirt Size: (Circle One) Adult Sm Adult Med Adult Lg Adult Extra Lg

**I hereby authorize summer school personnel to obtain emergency medical care for my child if needed.**

Parent/Guardian \_\_\_\_\_

**Registrations must be postmarked by June 3<sup>rd</sup>, 2024– No late registrations accepted.**

**Camp fee is \$20. – Payable to Appleton Area School District – due at time of registration. There will be NO refunds.**

Complete this form and return it to: **Summer Band Camp Registration C/O Matt DiPietro**  
225 N Badger Ave  
Appleton, WI 54914

**Band Camp Director:**  
Matt DiPietro: email [dipietromatthe@asds.k12.wi.us](mailto:dipietromatthe@asds.k12.wi.us)

**Office use only:** Registration received on \_\_\_/\_\_\_/\_\_\_, Amount paid \$\_\_\_\_\_ Cash or Check #\_\_\_\_\_