



**2023 SUMMER DAY CAMP (JUNE 26-30)
INTERN APPLICATION FORM**

The goal of Wilmington Children's Chorus Summer Camp is to provide an intensive choral experience to choristers who have completed second through eighth grade. Interns become part of our teaching team by giving instructional and logistical support to camp staff members. They assist in rehearsals by singing with appropriate vocal technique and attention to direction, assisting choristers who are having difficulty and leading by example. Each intern will be assigned a musicianship class and will assist the teacher of that class with classroom management. They also help camp staff supervise non-musical activities including lunch, snacks and recreation periods. Interns are responsible for learning and memorizing all camp music in a timely fashion. They may also be assigned solos and/or special projects. Interning with the WCC provides excellent experience for future jobs and college applications. Although interning is a fun experience, it requires hard work and dedication. Interns will be expected to be dependable and accountable additions to the WCC staff.

REQUIREMENTS:

1. Completed grade 9-12, or above.
2. Experience in singing and music and possess at least intermediate music reading skills.
3. Enthusiasm for working with children.
4. Availability for all camp hours (June 26-30, 9:00 AM to 4:00 PM), a set-up and workshop day on Friday, June 23 from 10:00-4:00 PM, and 2-3 assigned days of before and aftercare supervision from 8:00 AM - 9:00 AM and 4:00 PM - 5:30 PM.
5. Letter of recommendation from your choir teacher or voice teacher. (For non-WCC members.)
6. Audition with the artistic staff of the Wilmington Children's Chorus. (For non-WCC members.) After your application materials are received, you will be contacted regarding an audition time.

PERSONAL INFORMATION:

NAME OF APPLICANT: _____ AGE: _____ GRADE/YEAR IN SPR '23: _____

NAME(S) OF PARENT(S)/GUARDIAN(S): _____

ADDRESS: _____

HOME PHONE: (____) _____ - _____ PARENT'S WORK PHONE: (____) _____ - _____

APPLICANT'S CELL: (____) _____ - _____ PARENT'S CELL: (____) _____ - _____

E-MAIL: _____

EMERGENCY CONTACT IF PARENT/GUARDIAN(S) NOT AVAILABLE: _____

RELATIONSHIP TO APPLICANT: _____ PHONE: (____) _____ - _____

NAME(S) OF ADULTS OTHER THAN PARENT/GUARDIAN AUTHORIZED TO PICK YOU UP FROM CAMP:

T-SHIRT SIZE: **CIRCLE ONE:** SM M L XL

BACKGROUND INFORMATION:

DO YOU TAKE VOICE LESSONS? Y N FOR HOW LONG? _____

DO YOU PLAY AN INSTRUMENT? Y N INSTRUMENT(S): _____ FOR HOW LONG? _____

DO YOU READ MUSIC? Y N AT WHAT LEVEL? (CIRCLE ONE) BEGINNING INTERMEDIATE ADVANCED

PLEASE ATTACH A PARAGRAPH BRIEFLY DESCRIBING YOUR EXPERIENCE WORKING WITH YOUNGER CHILDREN & YOUR PERSONAL QUALITIES THAT WOULD MAKE YOU A GOOD MENTOR. IF YOU ARE CURRENTLY IN, OR WILL BE ENTERING COLLEGE, PLEASE INCLUDE YOUR MAJOR & IF YOUR CAREER PLANS INCLUDE WORKING WITH CHILDREN.

MEDICAL INFORMATION:

DO YOU SUFFER FROM ANY CONDITION OR ILLNESS THAT WILL REQUIRE SPECIAL ATTENTION OR MEDICATION? YES , NO

_____. IF YOU CHECKED YES, PLEASE DESCRIBE: _____

WILL YOU BE BRINGING ANY MEDICATION WITH YOU? YES _____ NO _____

IF YES, PLEASE LIST MEDICATIONS: _____

ARE YOU RESTRICTED FROM PARTICIPATING IN ANY PHYSICAL ACTIVITIES? YES _____ NO _____

PLEASE LIST RESTRICTED ACTIVITIES: _____

TO APPLY: Please complete the application form and mail it to:

Wilmington Children's Chorus
1101 N. Market St.
Wilmington, DE 19801

QUESTIONS should be addressed to Pam Queen, Program Coordinator at
(302) 507-1275 or pam@wilmingtonchildrenschorus.org

SEE REVERSE FOR HEALTH & SAFETY INFORMATION

SAFETY INFORMATION & WAIVERS

Complete signature page required for attendance!

The Wilmington Children's Chorus has put in place extensive safety precautions relating to COVID-19. Rest assured, we take the health and well-being of our interns, choristers, and staff members very seriously. WCC has been holding in-person activities since July of 2020. We are confident and looking forward to a safe and healthy summer camp! Depending on the nature of COVID-19 in Delaware and recommendations from public health officials, WCC may take any of the following precautions:

- Chorister's **may be required** to distance from others while singing or completing other activities indoors.
- Chorister's **may be required** to wear a mask while indoors, except when eating or drinking.
- Your chorister **may be required** to complete symptom screening at home, prior to arriving at camp each day.

WCC commits to the following precautions:

- Cleaning and sanitizing high-contact surfaces on a regular basis.
- Providing air filtration units to circulate and sanitize the air in our camp spaces.
- All staff are required to be vaccinated against COVID-19, including booster doses.

The following signatures are REQUIRED to participate in camp as an intern. Interns over 18 years old may sign for themselves. All others require signature of parent/guardian. Please contact WCC staff with any questions or concerns!

COVID WAIVER

The Wilmington Children's Chorus (WCC) has put in place protective measures to reduce the spread of COVID-19; however, WCC cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending WCC programs, rehearsals or other events could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, and in consideration for me and/or my child(ren) being allowed to participate in WCC summer camp, on behalf of myself and my child(ren), I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and myself may be exposed to or infected by COVID-19 by attending WCC programs, rehearsals and other events and that such exposure or infection may result in personal injury, illness, permanent disability, and death to me or my child(ren). I understand and acknowledge, and voluntarily accept, the risk of me and/or my child(ren) becoming exposed to or infected by COVID-19 at WCC and that such risk or exposure may result from the actions, omissions, or negligence of myself, my child(ren) and/or others, including, but not limited to, WCC employees, volunteers, agents, representatives and program participants (when acting in their respective capacities at WCC) and their families. I further understand and acknowledge that it may be difficult or impossible to determine where and when any person (including me and/or my child(ren)) may risk being exposed to, or be exposed to, COVID-19, and that such exposure, even if I or my child(ren) attend or participate in WCC programs, rehearsals and other events, may not have occurred as a result of such participation or attendance. On behalf of myself and my child(ren), I voluntarily acknowledge and assume all of the foregoing risks, and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with or as a result of my or my child(ren)'s participation in or attendance at WCC programs, rehearsals or other events. Accordingly, I hereby forever release, discharge, covenant not to sue and agree to hold harmless WCC, its employees, volunteers, rental facilities where my child(s) activities have taken place (First and Central Presbyterian Church) agents and representatives, of and from any and all claims, demands, injuries, damages, actions, causes of action, costs or expenses of any kind ("Claims") related to COVID-19 or otherwise.

Child's Name: _____ Parent Signature: _____

PHOTO RELEASE/ACTIVITY RELEASE

I hereby grant permission for my child to participate in all of the activities of the 2022 WCC Summer Day Camp (JUNE 20-24). I understand photos and audio/video recordings of my child may be taken in the course of normal camp activities and may be used for promotional materials (both print and online).

My child is physically able to participate in all aspects of interning.

I hereby release the Wilmington Children's Chorus and its employees and those who will be working with the students from any liability in the event of illness, injury or loss occurring to my son/daughter or their personal belongings and will make no claim as a result thereof. I hereby give permission for my child to be medically treated, as deemed necessary by the staff involved in the WCC Summer Day Camp. I hereby authorize any licensed medical person or facility to treat my son/daughter. I agree to assume full financial responsibility for any medical services provided.

Date: _____ Signed: _____