



PANOLA COLLEGE

3rd ANNUAL MILITARY DRUM MAJOR CAMP – JUNE 4 - 8, 2023

PANOLA COLLEGE CAMP DIRECTORS

Dwaine Hubbard: 903-926-3584
Nick Durham: 903-363-2624
Email: ndurham@carthageisd.org

MILITARY DRUM MAJOR INSTRUCTORS

Deshmond Johnson – Former SFA Drum Major
Tori Thomas – Former KC Drum Major
Jackie Johnson – Former Drum Major

CAMP FEES

ENTRY DEADLINE MAY 26, 2023

(check one)

_____ FULL CAMP.....\$395.00
_____ Commuter With Meals.....\$275.00

Make Checks or Money Orders to:

PANOLA COLLEGE DRUM MAJOR CAMP

Mail Entry Form and Payment to:

PANOLA COLLEGE DRUM MAJOR CAMP
% Nick Durham, Carthage Band Director
145 Cherry Street, Tatum, TX 75691

A Minimum deposit of **\$175.00** is required. The balance is due by deadline date. Make payments with School Check, Money Order, or Personal Check.

DO NOT SEND CASH

REFUNDS

\$25.00 fee on refund prior to entry deadline.
\$35.00 fee on refunds after entry deadline.

NO REFUNDS FOR STUDENTS LEAVING CAMP EARLY.

Last Name	First Name	Middle Initial
Grade for Sept. 2023	Date of Birth	Male or Female
Home Mailing Address		
City	State	Zip
()	Student's Phone Number	Name of School
Band Director's Name	Band Director's Email	
()	Band Director's Phone	Student's Shirt Size: S M L XL 2XL (Circle One)

Directors: if you have two campers that would like to room together, please indicate that here:

Student 1: _____ Student 2: _____

Panola College /Drum Major Camp will not tolerate cases of vandalism, fighting, substance abuse or other violations of college or camp rules and regulations. No refunds are given in cases of expulsion from camp. You the parent or guardian understands that the camp reserves the right to expel a student on these grounds. Parents and/or Guardians will be notified immediately in case of an infraction.

Parent or Guardian Signature _____ Date _____

MEDICAL RELEASE

The following release **MUST** be read, completed, and signed by the student and parent/guardian before a place can be reserved for the student in the Panola Military Drum Major Camp:

This is to certify that I, _____, grant permission for my dependent child, _____ to be treated medically while in attendance at PANOLA COLLEGE by local physicians. I further authorize treatment, at the local hospital or medical center, by physicians in attendance at the facility, should treatment be required.

Is your child covered by any form of hospital or surgical insurance?

Yes or No
(circle one)

If yes, please give the name of the company and membership or policy number and attach a photocopy of your insurance card:

List any allergies or disability of which we should be aware _____

List any special medication or treatment your child requires _____

Can over-the-counter medicine such as headache tablets or upset stomach formula be given to your child by our staff? **Yes or No (circle)**
Written permission from a family doctor must be sent with the child if he or she is to have shots or regular treatment while at camp. **PANOLA COLLEGE AND THE MILITARY DRUM MAJOR CAMP WILL NOT BE RESPONSIBLE FOR PAYMENT OF ANY MEDICAL BILLS INCURRED DURING CAMP OR FOR REGULAR TREATMENT.**

Parent or Guardian (Please Print Name) _____ Signature _____ Date _____

Make a copy of this form after completing. As soon as entries are received, an information letter will be mailed to you telling check in time, supplies needed and etc. We hope your child has a great time at our camp. **GET LOTS OF SUNSHINE BEFORE CAMP!!!!!!**