

PANOLA COLLEGE

Fourth ANNUAL MILITARY DRUM MAJOR CAMP JUNE 14-18, 2026



PANOLA COLLEGE CAMP DIRECTORS

Dwaine Hubbard 903-926-3584
Email-dhubbard@panola.edu
Todd Dock – Carthage High School
Email-tdock@carthageisd.org

MILITARY DRUM MAJOR INSTRUCTORS

Deshmond Johnson-Former SFA DM
Tori Thomas-Former KC Drum Major
Jackie Johnson, RN – Former Drum Major
Drew Jackson – Former CHS Drum Major

_____	_____	_____
Last Name	First Name	Middle Initial

Grade for Sept. 1, 2024	Date of Birth	Male or Female

Home Mailing Address		

City	State	Zip
(_____)		
Your Phone	Your School Name	
_____	(_____)	
Band Directors Name	Director Cell	
_____	_____	
Band Director Email	T-Shirt Size S, M, L ,XL, XXL	
_____	(Circle One)	

CAMP FEES ENTRY DEADLINE MAY 29, 2026

(check one)

_____ FULL CAMP.....\$395.00

_____ Commuter With Meals.....\$275.00

Make Checks or Money Orders To:

PANOLA COLLEGE DRUM MAJOR CAMP
ATTN: Dwaine Hubbard, Director
1109 W Panola Street
Carthage Texas 75633

DO NOT SEND CASH!

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.

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.

ROOMMATE REQUEST:
STUDENT _____

Directors if you have two campers that would like to room together please combine their entries.

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, parent and or 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 so, please give the name of the company and membership/policy number and **attach a photocopy of your insurance card.**

List any allergy or special 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 WHETHER INCURRED OR 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!!!!!!**