The 2012 Lakota Summer Jazz Clinic

AND FOR THE SECOND YEAR: The Lakota Summer Jazz Clinic ADVANCED JAZZ BAND!

For 7th, 8th and 9th Grade Instrumentalists (2012-13)

June 11-15 * 9:00am-12:00pm

Lakota East High School

Concert Friday at 11:15am in the Lakota East Theater

The Lakota Summer Jazz Clinic is a summer jazz experience catered to the needs of the rising stars of jazz! This musical experience will not only share information about jazz styles and improvisation, but can give each student an opportunity to develop self-confidence and gain skills that are both personally valuable and meaningful. The clinic is intended for students that will be in grades 7, 8 or 9 for the 2012-13 school year. See more information in this flyer about our ADVANCED JAZZ BAND!

The Lakota Summer Jazz Clinic is led by Mr. Todd Hartman (trumpet instructor), Mr. Drews Mitchell (rhythm section instructor), Mr. Brian Botdorf (trombone instructor) and Mr. Bill Burns (saxophone instructor). Students will work in both big band and sectional rehearsals in order to maximize instruction. The students will have the chance to show our community what they've learned by performing a free concert on Friday, June 15 at 11:15am in the Lakota East Theater. Creating an atmosphere that is fun, exciting and educational is a major part of the instruction and the concert that week.

Registration for the Lakota Summer Jazz Clinic is done through the mail. Please detach the registration form **and the medical form** then mail them and a check (made out to "Lakota East Upbeat Club") or money order for \$90.00 to:

The Lakota Summer Jazz Clinic - Attn: Drews Mitchell

3497 Wildwood Dr.

Maineville, OH 45039

Registration forms are due by <u>Friday, May 25</u>, if you would like a **t-shirt**. Students may register at the door on June 11th as well. Please be assured that your registration is confirmed if we do not contact you. **Check-in will take place on "Main Street" of Lakota East High School (by the theater) at 8:45am on June 11th. Please do not hesitate to contact us at 682-4115 ext. 10416 or 759-8615 ext. 15186 or lakotasummerjazzclinic@hotmail.com with any questions. Information is also available online at <u>www.lakotawestbands.org</u> or <u>www.lakotaeastbands.org</u>. See you at the Jazz Clinic!**

Please mail this completed form (<u>emergency medical form included</u>) and the \$90 registration fee (check made out to "Lakota East Upbeat Club") to:

The Lakota Summer	Jazz	Clinic						
3497 Wildwood Dr.								
Maineville, OH 4503	39							
NAME								
(As you wish for it to appe								
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PARENT NAMES	3							
EMAIL ADDRES	S							
GRADE		(in 2	2012-13)					
PHONE								
THONE								
ADDRESS								
INSTRUMENT_				D	oes your	student p	lan to auditi	ion for the
Advanced Jazz E	Band ((detail	s on la	ast pag	e of this p	acket)? _	YES	NO
SCHOOL						_		
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EMERGENCY MEDICAL FORM - Purpose: To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while at the jazz clinic, when parent or guardian cannot be reached.

Student Name			
Student Address			
	Zip		
Home Phone#	Date of Birth	Grade	
Mother's Name	Cell/pager		
Work Phone			
Father's Name	Cell/pager		_
Work Phone			
	d and to whom your child may		
1	Relationship		Phone
2	Relationship		Phone
3	Relationship		Phone
frequent basis, and any phys	ical impairments to which a ph	ysician should be	alerted:
	Pł		
Dentist to be called	P	hone	
Preferred local hospital			
In the event reasonable attempts administration of any treatment d practitioner is not available by and reasonably accessible. This author licensed physicians or dentists corsuch surgery. Date	NT Please sign either #1 or # to contact me have been unsuccessf eemed necessary by above named d other licensed physician or dentist; a ization does not cover major surgery curring in the necessity for such surgery NT rgency medical treatment of my chil azz clinic coordinators to take NO ac	iul, I hereby give my of loctor or in the event nd (2) the transfer of y unless the medical gery are obtained pri	t the designated preferred f the child to any hospital opinion of two other for to the performance of
Date			
Signature of Custodial Parent/Gua	rdian		

The Lakota Summer Jazz Clinic ADVANCED JAZZ BAND!

The Advanced Jazz Band is designed to offer more developed musicians the opportunity to work on more difficult literature in an ensemble setting. Students will still enjoy the sectional, improvisation, and other small group aspects of the summer jazz clinic, while rehearsing big band music in a more advanced environment.

Any LSJC participant is eligible to audition. Students who choose not to audition and students who are not selected for the Advanced Jazz Band will be placed in a regular jazz band. Due to the importance of instrumentation, refunds for students who are placed in a regular jazz band rather than the advanced jazz band will not be available.

Auditions will be held in the Lakota East High School (Main Campus) jazz band room (Rm. #186) on Wednesday, June 6. Each student that wishes to audition for the Advanced Jazz Band should indicate this intention on the registration form and sign up for an audition time on the web at

http://www.signupgenius.com/go/904094BA8AC229-auditions

Students should be prepared to play their choice of any piece of jazz music (approximately 32 measures in length) which they feel positively demonstrates their musical abilities. Percussionists should be prepared to play a variety of styles on drum set (Examples: Swing, Rock, a Latin style of your choice). All students may be asked to play major scales up to two flats and two sharps (percussionists play scales on vibraphone). All students may be asked to sight read.

Please do not hesitate to contact us with questions at lakotasummerjazzclinic@hotmail.com

We look forward to seeing you at the clinic!