



RockBand University

720 Olive Dr. Suite H, Davis, CA
530-746-1957 | info@rockbanduniversity.com
rockbanduniversity.com

New Student Application

RockBand Sessions - submit an application to be matched into a band for the upcoming session. RockBand University (RBU) accepts musicians ages 10 - 18. Spaces are limited and are based off of our pool of enrollees. Participants will be notified the week before the session starts. Each session ends with a live performance at a local venue.

Tuition is \$245 / 6 week session
+ \$200 for each additional sibling enrolling in the same session

Please submit applications via email to: info@rockbanduniversity.com
or in person at RockBand University (720 Olive Dr., Suite H, Davis)

CONTACT INFORMATION

Student Name: _____ Age: _____

Parent/Guardian Name(s): _____

Primary Phone: _____ Secondary Phone: _____

Email Address: _____

RockBand University sends communications primarily via email.

Additional Email: _____

Address: _____

City: _____ State: _____ Zip: _____

MUSIC BACKGROUND AND INTEREST

Instrument(s) that you are applying for.

If there is another applicant(s) that you would like to be placed with, please list their name(s).

Please list your music experience and be as specific as possible.
For example: amount of time you've been playing, songs that you know how to play, lessons that you have taken (amount of time and teacher), school programs that you have participated in, etc.

Please list the styles of music that you like and your favorite bands.

Sessions most often meet on Sundays for an hour and a half. Applicants will be placed in a timeslot **based on availability**. If Sundays do not work, we can see if the band you're matched in can do a weekday evening. Please let us know of any time constraints that you may have on Sundays.

EMERGENCY CONTACT

First Contact's Name: _____ Relationship: _____

Primary Phone: _____ Secondary Phone: _____

Second Contact's Name: _____ Relationship: _____

Primary Phone: _____ Secondary Phone: _____

SAFETY INFORMATION

Does the student have any medical conditions, allergies, or special needs the staff should know about?

Does the student have any behavioral or emotional issues the staff should know about?

Is the student taking any medications to treat a physical, emotional, or behavioral condition?

CODE OF CONDUCT AGREEMENT & RELEASE OF LIABILITY

I, (student) _____, will abide by the guidelines listed below while attending any programs at RockBand University.

- No violence of any kind. Bullying will not be tolerated.
- Always respect each other. Be respectful to all students, guests, and staff members.
- Respect all instruments, equipment, and property. Treat them with care.

- Be supportive of one another, especially in regard to individual musical abilities and creative efforts.

I have read and agree to abide by these guidelines. I understand that my violation of them can lead to suspension or expulsion from any of the programs at RockBand University without a refund in tuition.

Student's Signature: _____ Date: _____

Guardian's Signature: _____ Date: _____

I, _____, agree to abide by the following:

1. I fully understand that attending RBU as a student will involve activities such as, but not limited to, a loud environment, using electrical equipment such as amplifiers, speakers, and musical instruments. I understand that RBU activities may pose risks of bodily injury due to the inherent nature of each activity. I fully understand the risks and dangers associated with participation in RBU activities, that the risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in RBU activities, or the condition in which the RBU activities take place. I also fully understand that there may be other risks and social and economic losses either not known to me or readily foreseeable at this time, and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in RBU activities and assume all risks and responsibilities surrounding my participation in these activities.
2. I agree and warrant that I will examine and inspect each RBU activity in which I take part, and if I observe any conditions that I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the RBU activity and will refuse to take part in the said activity until the condition has been corrected to my satisfaction.
3. I hereby RELEASE, discharge, and covenant not to sue RBU, its administrators, directors, volunteers, employees, sponsors, advertisers, and if applicable, owners and lessors of premises where RBU activities may occur (each considered one of the Releasees herein), from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf makes a claim, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS at my own expense each of the Releasees from any claims, suits, or actions of any nature, including attorney fees and costs, which are in any way connected with participation in any and all RBU activities. I understand that this Release of Liability/ Indemnity/Emergency Treatment form binds my family, heirs, executors, administrators, and assigns, as well as myself.
4. In case of emergency, accident, illness, or other incapacity occurring while under RBU's

authority, I give my permission to be treated by medical professionals and admitted to the hospital if necessary. This authorization applies whether or not the charges are covered by my insurance, and I am responsible for all reasonable medical and emergency expenses incurred on my behalf, regardless of whether I would have authorized such expenses under separate circumstances.

5. I hereby GRANT RBU permission, the absolute right and permission to take, use, sell, reuse, publish, and republish photographic portraits, pictures, video, and audio recordings of the student or in which the student may be included in whole or in part, or composite or distorted in character or form, without restriction as to changes or alterations from time to time, in conjunction with the student's own or a fictitious name, or reproductions of such photographs in color or otherwise, made through any medium, and in any and all media, including the internet, for art, advertising, trade, promotional use, or any other purpose whatsoever. I also consent to the use of any published matter in conjunction with such Media. I consent to the digital compositing or distortion of the portraits or pictures, including without restriction any changes or alterations as to color, size, shape, perspective, context, foreground, or background. I waive any right that I may have to inspect or approve any finished product or products or the advertising copy or printed matter that may be used in connection with such Media or the use to which it may be applied. I release, discharge, and agree to hold harmless and defend RBU, its legal representatives or assigns, and all persons acting under RBU's permission or authority or those for whom RBU is acting, from any liability by virtue of any reason in connection with the making and use of such Media, including blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said Media or in any subsequent processing thereof, as well as any publication of them, including without limitation any claims for libel or violation of any right of publicity or privacy.

6. I agree that I will follow all RBU rules and will remain within the parameter of RBU activities at all times.

7. I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature, intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law, and agree that if any portion of this agreement is held to be invalid, the balance notwithstanding, shall continue in full force and effect.

Student's Signature: _____ Date: _____

I represent that I am the parent and/or guardian of the minor who has signed above and is the participant in the program(s). I agree that we both shall be bound by this release form.

Guardian's Signature: _____ Date: _____