



***RSCM-2024 Carolina Summer Choral Residency at Duke University
for Choristers and Adults
July 8-14, 2024***

Dear Adult Participant:

Included in this packet are the forms required for **ALL** adults to fill out and send in for the RSCM Carolina Summer Choral Residency at Duke University for Choristers & Adults to be held July 8-14, 2024. We are requiring proof of vaccination for the Covid-19 virus. Duke University also requires vaccination.

Please fill out the following forms and send them to the course registrar:

Adult Application - Photo Release - Travel Information – Self-Declaration.

The two reference forms need to be given to the appropriate people with an envelope addressed to the registrar at the address below.

The Self-Declaration needs to be filled out each year.

The **reference forms are valid for three (3) years**. If I have them on file current as of last year, you do not have to redo them. Email me if you are uncertain about your references.

Please have either your choir director or church minister to sign the application form.

You may go online through the link at www.carolinarscm.org. You will still be required to send/email me your Self Declaration and Reference forms.

The registration fee if you choose to stay in the dorm at Duke is \$850. This includes semi-private room, tuition and meals. There is an additional fee of \$60 if you would like a private room.

In the case that you do not wish to reside at the dorm, you have the option of staying at the Washington-Duke Inn located very near the campus on Hwy 751. There is a shuttle that runs back and forth. We do have rooms set aside, but YOU have to register yourself. RSCM will be regarding you as a day participant and your cost to me will be the following:

\$500 to include tuition only – most of you take most of your meals at the hotel. Please talk with me if you will be staying at home and commuting to the course.

Please call them at 919-490-0999 and say that you with the RSCM Carolina Course at Duke University/Matthew Brown.

If you have any questions, please email me.

Marilyn Neely
Registrar
1765 W Pennsylvania Ave
Southern Pines NC 28387

registrar@carolinarscm.org

RSCM Carolina Summer Choral Residency for Choristers & Adults
Adult Application
July 8-14, 2024

Name: _____
 Last First Middle Name you wish to be called?

Address: _____

Phone: _____ / _____ / _____
 Home Cell Email address

Emergency Contact: _____
 Name Phone Numbers

Special dietary needs or medical concerns: _____

Which part are you able to sing? Alto _____ Tenor _____ Bass _____ (ALL adult women sing Alto)

T-Shirt Size: _____
Please indicate for T-shirt Youth (S,M,L,XL), Ladies V-neck (S,M,L,XL,XXL) or Regular (S,M,L,XL,XXL)

Church Name and Address: _____

Choir Director: _____ Phone: _____ Email: _____

Choir Director/Church Minister Date

COURSE FEES

\$850.00 (\$900.00 after April 1) for adults staying in the dorm. Does **NOT** include the cost of music!

\$500 Adult Day participants. Does **NOT** include cost of music!

\$25 Discount off registration fee for members of RSCMA.

Non-refundable Deposit of \$100.00 due with application form.

Balance due June 1, 2024

Checks should be made payable to:
"RSCM Carolina Course"

Mail application form & deposit to:
Marilyn Neely, Registrar
1765 W Pennsylvania Avenue
Southern Pines NC 28387

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Photo/Media Release

I grant to the Episcopal Diocese of North Carolina, RSCM America, RSCM International and the RSCM America Carolina Summer Choral Residency at Duke University – 2024 and Adults - 2024 the right to take, copyright, and publish photographs, audio, or video footage of me in print and/or electronically. This release is also to include the websites and/or Facebook pages of said entities.

I agree that The Episcopal Diocese of North Carolina, RSCM America, RSCM International and RSCM America Carolina Summer Choral Residency at Duke University for Girls and Adults may use such photographs and recordings as publicity, or advertising to further their ministries and musical activities, and I waive any right to compensation, royalties, or ownership.

Print Your Name _____

Signature

Date

Please mail this form to:
Marilyn Neely, Registrar
1765 W. Pennsylvania Avenue, Southern Pines, NC 28387

**RSCM Carolina Summer Choral Residency
For Choristers & Adults
July 8-14, 2024**

Travel & Roommate Request

Participant's Name _____

*Please plan so you arrive at Duke University
Between 1:00-5:00 pm on Monday, July 8, 2024*

Travel - Arrival to and Departure from Course:

I will be arriving and departing by: Car _____ Plane:* _____ Other: _____

*Arrival: Airline _____ Flight # _____

Date: _____ Time: _____

Participants will be met at baggage claim at the **Raleigh-Durham International Airport (RDU)**

*Departure: Airline _____ Flight # _____

Date: _____ Time: _____

*Please arrange airline departures for no earlier than 7:15 pm on Sunday
from the Raleigh-Durham International Airport (RDU).*

Roommate Request if staying in Dorm:

If you have a roommate choice, please list your choices below and we will attempt to assign roommates accordingly.

Roommate Choice 1: _____

Roommate Choice 2: _____

Please mail this form to:
**Marilyn Neely, Registrar
1765 W. Pennsylvania Avenue
Southern Pines, NC 28387**

