

SEATTLE PACIFIC UNIVERSITY
IN PARTNERSHIP WITH EMP MUSEUM
PRESENTS





MINIUMBUIT RUJUHTISSIONISTDANCERRAPPERDJSINGER BANZIED DA CIE ACAMANA INDISTDRUMMERPERFORME SANJULINALI E EUJANIMA RITERDESIGNERSHREDDER CELLISTBANDMANEFANDIVA EDITURMANA GERSTUDIOMUSICIAN PIANIST SOLOIST PRODUCERS ON GAVETER PROTOGRAPHER KID ROADIETECHIES OUNDEXPLOREINI INTICIA MAIDILLES SISTANT PUNKCRAFTS MANFLUTIST MELALI GULLIGUE GEROCK 'NI'ROLI ERIVRICISTINDIFACT ANALIE DITA CHEET HANDING

Summer 2013 Music Therapy Camps for Children Ages 6-14 On the Autism Spectrum, or With Related Developmental Disabilities

The Music Therapy Program at Seattle Pacific University

is the first undergraduate Music Therapy program in Washington state. Under the direction of Associate Professor of Music Carlene Brown, Ph.D., MT–BC, its rigorous, multidisciplinary curriculum trains musicians both to realize their full potential as music therapists and to pass the national examination to earn their Board Certified Music Therapist (MT–BC) designation. A distinct element of SPU's program is the encouragement of physical, emotional, and spiritual well-being. The program also offers many opportunities for musicians to use their skills to serve others through the functional use of music. For more information, visit spu.edu/musictherapy.



Carlene Brown, Ph.D., Director Associate Professor of Music, Seattle Pacific University Board-Certified Music Therapist



Andrew Zook, MT-BC, Camp Director Alumnus, Seattle Pacific University Board-Certified Music Therapist

EMP Museum is housed in a 140,000-square-foot building that includes multiple innovative galleries, an interactive sound lab, and a concert venue with state-of-the-art sound and lighting that houses the largest indoor LED screen in the world. Since opening its doors in 2000, EMP Museum has welcomed more than five million visitors. Through dynamic programs, cutting-edge technology, and interpretative, interactive exhibitions focused on American popular culture, EMP seeks to engage museum visitors in critical thinking about creativity in contemporary society by educating and inspiring a range of visitors of different ages, interests, and experience. For more information, visit empmuseum.org.



EMP Museum







SEATTLE PACIFIC UNIVERSITY MUSIC THERAPY CAMPS AT EMP MUSEUM

FOR CHILDREN AGES 6–14 ON THE AUTISM SPECTRUM, OR WITH RELATED DEVELOPMENTAL DISABILITIES

Seattle Pacific University, in partnership with EMP Museum, is hosting Music Therapy Camps. These camps, led by Seattle Pacific University board-certified music therapists and student interns, provide opportunities for social engagement, enhanced awareness and appreciation of self and others, and creative expression through alternative communication styles of music-making. Through individual and group experiences, music therapists will offer experiences within a structured setting to explore music, including drumming, singing, and improvisational music-making.

We will have a great therapist/camper ratio to ensure your child's fun with music!

MORNING AND AFTERNOON MUSIC THERAPY CAMPS

EMP has always been an exciting place for children to explore their own creativity in music, art, and dance with their peers. Music Therapy Camps are facilitated environments in which children on the autism spectrum, or with related developmental disabilities, add their own beats and melodies to this vibrant museum. Children will make music through voice, percussion, and dance, and engage in social experiences with their peers, and with music professionals and student interns from Seattle Pacific University.

The camps are open to children 6–14 years of age on the autism spectrum, or with related developmental disabilities. No prior music instruction or special ability is required. For more information, call **206-281-2411** or email **mtcamps@spu.edu**.

CAMP	AGES	DATES	TIMES	
June Morning	6–10 yrs.	June 24–28	9–11 a.m.	
June Afternoon	10–14 yrs.	June 24–28	1–4 p.m.	
July Morning	6–10 yrs.	July 1–3	9–11 a.m.	
July Afternoon	10–14 yrs.	July 1–3	1–4 p.m.	
Individual Lesson	6–10 yrs.	20 min. sessions scheduled after camp.		
Individual Lesson	10–14 yrs.	30 min. sessions scheduled before camp.		







CHILD INFORMATION

				O FEMALE O MALE
NAME (FIRST AND LAST)			NICKNAME	
ADDRESS				
CITY	STATE	ZIP	HOME PHONE	
DATE OF BIRTH GRAD	DE ENTERING 1	THIS COMING FAI	L SCHOOL NAM	O PRIVATE O PUBLIC
SHIRT SIZE: OSMALL	O MEDIUM C	LARGE O X-L	ARGE	
INSTRUMENT/MUSICAL ST	TYLE PREFERE	ENCES:		
WILL YOU BE PROVIDING	YOUR CHILD V	VITH AN AIDE OR	PERSONAL ASSISTANT AT TH	IS CAMP? OYES ONO
MEDICAL/BEHAVIORAL NO	OTES:			
PLEASE NOTE: IF YOUR CONFORMATION. NO ADDIT	HILD REQUIRE	S A PERSONAL / L BE CHARGED I	ASSISTANT OR AIDE, PLEASE A FOR MEDICAL/BEHAVIORAL AS	ATTACH HIS OR HER CONTACT SSISTANTS TO ATTEND.
QUESTIONS OR CONCER	NS MAY BE DIF	RECTED TO DR. C	CARLENE BROWN AT MTCAMP	S@SPU.EDU.
PARENT/LEGAL GUA	ARDIAN INFO	JRWATION		
NAME (FIRST AND LAST)			RELATION TO	O APPLICANT
ADDRESS			EMAIL	
ADDRESS			LIMAIL	
CITY	STATE	ZIP	HOME PHONE	WORK/CELL PHONE
NAME (FIRST AND LAST)			RELATION TO	O APPLICANT
ADDRESS			EMAIL	
CITY	STATE	ZIP	HOME PHONE	WORK/CELL PHONE
PLEASE NOTE: PARENTS PORTION OF THE CAMP A			WHO WISH TO ASSIST THEIR C	CHILD ARE WELCOME TO ATTEND ANY
EMERGENCY CONTA	ACT INFORM	IATION (Parer	nt or legal guardian prefe	rred)
NAME (FIRST AND LAST)			RELATION TO) APPLICANT
ADDRESS			EMAIL	
CITY	STATE	ZIP	HOME PHONE	WORK/CELL PHONE







CHILD HEALTH INFORMATION

		(HEREAFTER REFERRED TO AS "MINOR")
NAME (FIRST AND LAST)		
WEIGHT	HEIGHT	AGE
NAME OF PHYSICIAN	F	PHONE
PLEASE DESCRIBE ANY MEDICA	L CONCERNS, ALLERGIES, OR PH	HYSICAL CONDITIONS:
AUTHORIZATION TO SEEK	MEDICAL TREATMENT	
Important: The following m	nust be completed for attend	dance.
treatment that a medical profession cannot be reached, I further surgical examinations, operainjuries, anesthesia, and/or band/or dentist in attendance to the release of medical rep Minor to the hospital. I hereb	fessional may deem necessar authorize and consent to the a tions, treatment, or all other r blood transfusions to the abov at the medical center deemed ort(s) to any doctor or agency	n to SPU and EMP to seek medical and/or surgical ry for my child. In the event I or my emergency contact administration of any and all medical, dental, and related care, including the administration of drugs, tests, re-named Minor that may be ordered by the physician of necessary for emergency treatment. I hereby consent ry, and consent to the admission of the above named esponsibility for costs and expenses of such medical to a medical facility.
PRINTED NAME OF PARENT AND	/OR GUARDIAN	RELATIONSHIP TO APPLICANT
SIGNATURE OF PARENT AND/OF	R GUARDIAN	DATE

LIABILITY RELEASE

Important: This must be completed for attendance.

I authorize my child to participate in the Music Therapy (MT) Camp. I acknowledge the inherent risks that may result from my child's participation in the MT Camp, including falls, fractures, contraction of infectious diseases, or misbehavior of other children, all of which may result in injury or loss of life to my child or damage to his/her/our property. I hereby assume these risks, including those caused by simple negligence of SPU or EMP; release all claims held by me, my spouse, and my child arising from my child's participation in the MT Camp; and accept full responsibility for the cost of all medical treatment to my child as a result of any injuries caused by or through such other risks.

I further agree to indemnify and hold harmless SPU and EMP and their officers, employees, agents, students, and representatives from any injuries, liabilities, claims, damages, and expenses, including attorney fees, incurred by SPU, EMP, me, my child, or on behalf of my child, arising from my child's attendance and participation in the MT Camp, except that each party shall bear any liabilities or expenses arising in whole or in part from its own negligent acts or omissions or those of their respective officers, employees, agents, students, and representatives.







If the provision of this agreement is found to be invalid or unenforceable, then the remainder of this agreement will have full force and effect, and the invalidated provision will be modified, or partially enforced, to the maximum extent permitted by Washington State Law.

I have read all of the above terms and conditions, and I understand and agree to be bound by them.

PRINTED NAME OF PARENT AND/OR GUARDIAN RELATIONSHIP TO APPLICANT	
SIGNATURE OF PARENT AND/OR GUARDIAN	DATE
PHOTO RELEASE Please note that approval of this release is not require your approval will help us to promote future workshops	d for your child to attend Music Therapy Camp. However, s and other educational youth offerings.
visual images or audio recordings) in its internal public	spapers, magazines, websites, and brochures. There is no appensation for usage. This release does not include
PRINTED NAME OF PARENT AND/OR GUARDIAN RELATIONSHIP TO APPLICANT	
SIGNATURE OF PARENT AND/OR GUARDIAN	DATE
HOW DID YOU HEAR ABOUT US?	
O SPU/EMP Website OSPU/EMP Email/Newsflash	n ○ Teacher/Counselor ○ Friend
O Newspaper O Magazine O Brochure at	







CAMP SELECTION

CAMP	AGES	DATES	TIMES	FEE	√
June Morning	6–10 yrs.	June 24–28	9–11 a.m.	\$250	
June Afternoon	10–14 yrs.	June 24–28	1–4 p.m.	\$375	
July Morning	6–10 yrs.	July 1–3	9–11 a.m.	\$150	
July Afternoon	10–14 yrs.	July 1–3	1–4 p.m.	\$225	
Individual Lesson	6–10 yrs.	20 min. sessions scheduled after camp. Instrument:		\$20/each	
Individual Lesson	10–14 yrs.	30 min. sessions scheduled before camp. Instrument:		\$30/each	
TOTAL:				\$	

REGISTRATION AND PAYMENT

Nonrefundable payment in full is required with registration. Full payment will be refunded if a camp is cancelled due to insufficient enrollment or lack of available space. Please note that enrollment in the Music Therapy Camps is limited. Registrations are processed on a first-come, first-served basis. Parents interested in individual lessons will be contacted to schedule lesson times.

To register your child for the camp:

- 1. Register and pay online at spu.edu/mtcamps2013.
- 2. Fill out, sign, and mail pages 3–6 (Child Information, Child Health Information, Authorization to Seek Medical Treatment, Liability Release, Photo Release, and Camp Selection) to:

Seattle Pacific University Music Department 3307 Third Ave West, Suite 310 Seattle, WA 98119 Fax: 206-281-2430

Email: mtcamps@spu.edu

Note: No child will be able to attend camp without completed and signed forms. Please allow 7–10 business days to process and confirm your registration and payment.







SEATTLE PACIFIC UNIVERSITY MUSIC THERAPY CAMPS AT EMP MUSEUM GENERAL INFORMATION

AGE AND ADMITTANCE

Music Therapy (MT) Camps are available to children ages 6–14 on the autism spectrum and/or with other pervasive developmental disorders. Although this camp is designed for campers with these specific diagnoses, children with diverse diagnoses are encouraged to apply.

INDIVIDUAL LESSONS

Music therapy interns from Seattle Pacific University offer individual sessions to campers who are seeking a deeper knowledge of an instrument, technical skill, or individual support on how to develop already strong musical skills into strong social and communication skills. All individual sessions are supervised by a board certified music therapist and are on a first-come, first-served basis. Call or email the contact information below to see if individual lessons are right for your child.

CHILD HEALTH INFORMATION AND LIABILITY RELEASE

Please print, fill out, and sign pages 3–6 (Child Health Information, Authorization to Seek Medical Treatment, Liability Release, Photo Release, and Camp Selection), mail them to Seattle Pacific University, 3307 Third Ave. West, Suite 310, Seattle, Wash., 98119. No campers may be dropped off without these forms.

LOCATION

All MT Camps are held at EMP Museum in Seattle, Wash. Drop-off and pick-up take place at the EMP turnaround at 5th Avenue and Harrison Street. You will be notified of any location changes within the museum. All classes are held on the EMP campus and in EMP facilities

SNACKS

Due to the nature of the camp, snacks will not be provided during the duration of any and all camp sessions. If a parent or guardian provides a snack for a child, it must come with a written permission slip.

CANCELLATION POLICY

Cancellations must be made seven days prior to the start of the session to receive a full refund. No refunds will be granted after this time. SPU and EMP reserve the right to cancel a camp if enrollment is insufficient. In this case, any funds deposited will be refunded in full.

QUESTIONS?

Email mtcamps@spu.edu or call 206-281-2411.

Note: If desired camp week is full, please call 206-281-2411 or email mtcamps@spu.edu to be added to the waiting list.