

The Royal School of Church Music Charlotte Course for Boys, Girls, Teens, and Adults  
July 17-23, A.D. 2023

Adult Participant Registration Form

**Please circle one:** Adult Resident Participant (housing and meals provided) Adult Commuting Participant (meals provided)

Name: \_\_\_\_\_  
Last First MI (likes to be called)

Address: \_\_\_\_\_  
Street City State ZIP

Other RSCM Courses Attended: \_\_\_\_\_ Birth Date \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Home Work Cell/Other

Emergency Contact: \_\_\_\_\_ Date of latest COVID vaccine (required) \_\_\_\_\_  
Name Phone number(s)

Special Dietary needs or medical concerns: \_\_\_\_\_

Voice Part: Alto Tenor Bass Baritone (All Adult women sing Alto) **T-shirt size:** S M L XL XXL XXXL

Choir Information

Choir Director: \_\_\_\_\_ Choir (Church) Name: \_\_\_\_\_

Choir (Church) Address: \_\_\_\_\_  
Street City State ZIP

Choir Director's Telephone: ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Comments: \_\_\_\_\_

**To the Course Manager:** I certify that the adult participant listed above is in good standing in our choir, that s/he works appropriately with children and youth, and that s/he has the recommendation of his/her choir director and/or minister.

Choir Director \_\_\_\_\_ Date \_\_\_\_\_ Minister \_\_\_\_\_ Date \_\_\_\_\_

**Course Fees**

\$775 (\$795 after April 1) Resident Participant (excluding music) Mail completed registration form and deposit to:  
(private room and en suite private bath included) Tracy Reed, RSCM Course Registrar  
\$495 (\$525 after April 15) Adult Commuting participant (excluding music) 3873 FairLady Lane  
\$150/day (\$150 after April 1) Adult Day participant (excluding music) Indian Land, SC 29707-0600  
Deposit of \$100 due with each registration form. Balance due June 1, 2023 Registration deadline: April 30  
Deposits are not transferable or refundable after June 1. Early registration is encouraged to reserve your place!

**\*\*\$25 Discount off total registration fee for Members of RSCMA Affiliate Choirs\*\***

Adult participants must complete the Self-Declaration form attached and have two reference forms sent to the course manager. Write checks to "RSCM Charlotte Course."

For Office Use Only: Dep. Rec'd \_\_\_\_\_ Check # \_\_\_\_\_ Amount \_\_\_\_\_  
Date \_\_\_\_\_  
Bal. Rec'd \_\_\_\_\_ Check # \_\_\_\_\_ Amount \_\_\_\_\_  
Date \_\_\_\_\_

Confirmation sent \_\_\_\_\_ Ethics forms sent \_\_\_\_\_ Ethics Forms Rec'd \_\_\_\_\_

**Self-Declaration Form for Adult Participants  
Attending RSCM Courses/Events for Young People under age 18**

1. Title & Full Name: \_\_\_\_\_

2. Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell): \_\_\_\_\_

3. Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

4. How long have you lived at the above address? \_\_\_\_\_

If less than 12 months, please give the following information:

Previous  
Address: \_\_\_\_\_

How long there? \_\_\_\_\_

5. Where are you currently employed? \_\_\_\_\_

How long?  
\_\_\_\_\_

**6. REFERENCES -**

Please provide the names and addresses of two people, one ordained and one lay, who have known you for at least two years and who will provide a personal reference. (Please do not use the Course Manager or a family member.) (*Participants from school or community choirs may substitute a principal or board chair.*) Included are two reference forms. Please give the forms and envelopes addressed to the Course Manager to your references and ask them to send them directly to the Course Manager.

A. The Reverend \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

B. \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**7. RSCM EVENTS/ACTIVITIES**

Please list your prior RSCM course experience - venues and dates

- |    |    |
|----|----|
| 1) | 4) |
| 2) | 5) |
| 3) | 6) |

Adult Declaration Form, page 2

8. Do we have your permission to run a criminal background check?  
(Required of all adult participant.)

Yes \_\_\_\_\_ No \_\_\_\_\_

9. Have you taken a Safe Church/Sexual Ethics training course provided by your diocese or denomination?

Yes \_\_\_\_\_ No \_\_\_\_\_

If so, where? \_\_\_\_\_

Please enclose a copy of your certificate of attendance.

**\*\*\*Covid vaccinations and all CDC-recommended boosters are required to attend this course.  
Please send a copy of your vaccination card.\*\*\***

10. DECLARATION

We, who administer courses in the training of youth and adults through the Royal School of Church Music in America, are committed to the safety of all involved. In addition to providing musical and spiritual instruction of the highest available caliber, we intend to safeguard the physical, mental, spiritual, and emotional stability of participants and staff while under our supervision. You are therefore requested to provide the following information:

Have you ever been convicted of a criminal offense, other than a minor traffic violation?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been found by a civil court to have caused significant harm to a child or young person under the age of 18, or has any civil court made any finding against you that any child or young person under the age of 18 was at risk of significant harm?

Yes \_\_\_\_\_ No \_\_\_\_\_

Declaration Statement: *I declare that all the information I have provided is true and complete to the best of my knowledge, and I understand that a criminal background check will be run on me. I acknowledge that I am granting permission to RSCM America and the Charlotte Course to use, reproduce, and/or distribute photographs, films, video tapes, podcasts, media releases and sound recordings of me, without compensation or approval rights, for use solely in materials created for purposes of promotional, informational, or educational activities of RSCM America and the Charlotte Course. In addition, I specifically agree to indemnify and hold harmless, St. John's Episcopal Church, The Royal School of Church Music, Charlotte Course, and any course employee or course volunteer who participates in any aspect of the course from any loss, damage or demand sustained in any way related to my participation in the above designated course whether from their alleged negligence or otherwise, except with respect to the individual employee or volunteer where the loss is related to willful or wanton negligence or intentional misconduct of that course employee or volunteer. This release and indemnity as to St. John's Episcopal Church and The Royal School of Church Music, Charlotte Course is absolute to the extent not covered by insurance.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name (please print): \_\_\_\_\_

**Please return this form with your other registration materials to the Course Registrar.**

## RSCM in America Summer Courses Adult Participant Reference Form

Dear Sir or Madam:

\_\_\_\_\_ is registering to attend one of the summer courses sponsored by the Royal School of Church Music in America. These summer courses provide a place where people can share in the joy of community, the thrill of musical growth, and the peace of renewal. We who administer these courses are committed to the safety of all involved. In addition to providing musical and spiritual instruction of the highest available caliber, we intend to safeguard the physical, mental, spiritual, and emotional stability of participants and staff while under our supervision.

To that end, we ask you to provide the following information regarding this person. Kindly send it in the enclosed envelope directly to the Course Manager, **Mr. Alan Reed, 3873 FairLady Lane, Indian Land, SC 29707-0600**. Please know that all information will be kept securely and in strict confidence. We are grateful to you for your assistance in this matter.

Sincerely,  
The RSCM America Board of Directors

\_\_\_\_\_

How do you know this person?

How long have you known this person?

In what capacity have you seen this person interacting with children or youth?

Would you trust this person to interact with children and youth?

Is there anything you know about this individual that would make it inappropriate for him/her to be present with children and youth?

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_

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Signed \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_