

DIRECTIONS TO MYS RETREAT SKY-Y CAMP - PRESCOTT, AZ



September 23rd & 24th, 2017

From Phoenix, go north on INTERSTATE 17 to Cordes Junction

Proceed left on ROUTE 69 to the city of Prescott

Take the GURLEY STREET exit (veer *LEFT*) to the 4th stoplight (South Mt. Vernon St)

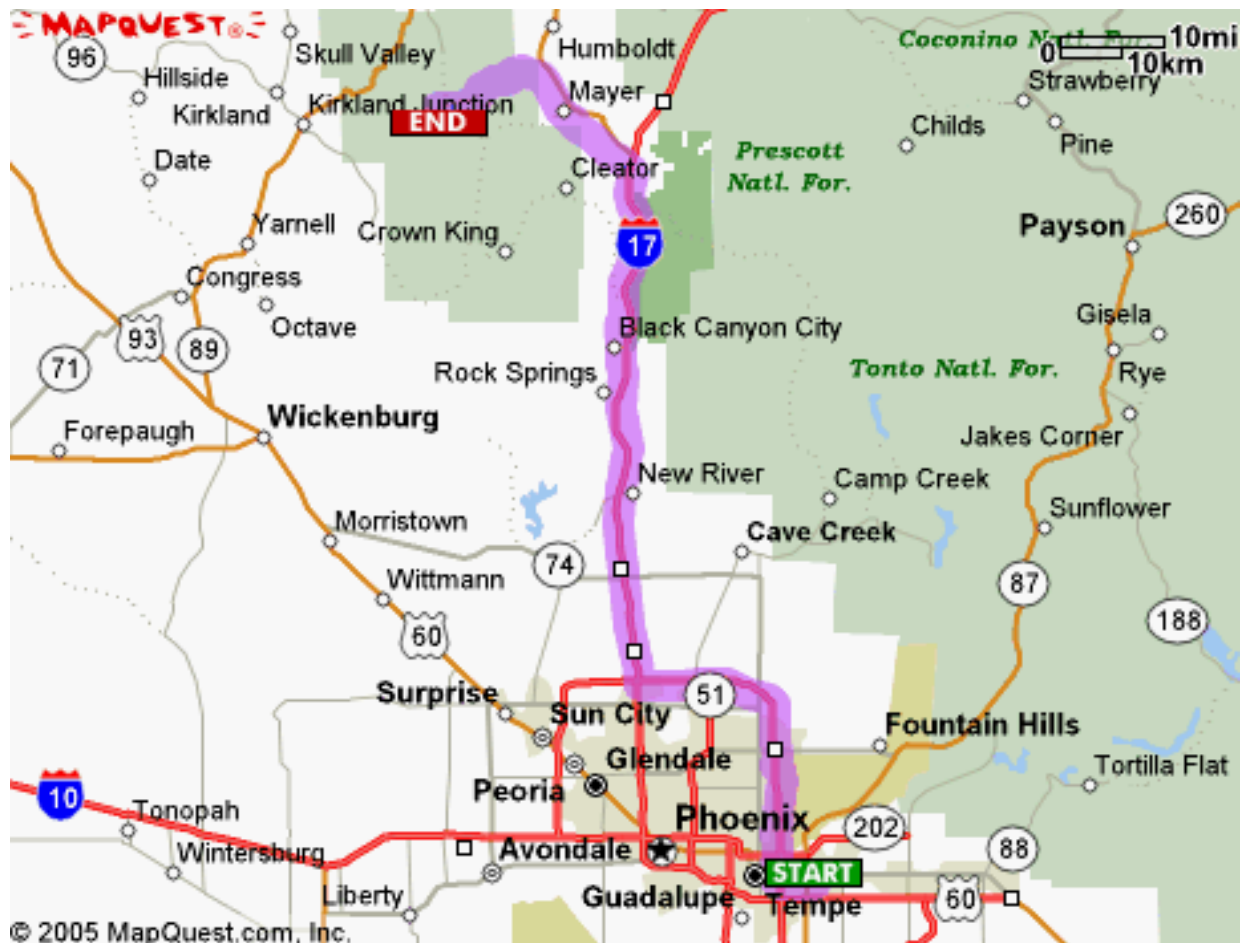
Turn *LEFT* onto MT. VERNON and proceed for approximately 6.5 miles

You will pass through the Groom Creek area and pass several other campsites.

Sky-Y Camp is almost at the end of the paved road. Look for our sign.

If you find yourself on a dirt road, you've just passed Sky-Y camp

When you come to the Sky-Y Camp sign, make a right turn onto a dirt road...
camp is 100 yards away --- parking lot to your *LEFT*.



Division I Retreat



LOCATION: SKY-Y CAMP, PRESCOTT, ARIZONA

See attached sheet for directions

LODGING:

Cabins with bunk beds (8 students per cabin). One or two parent chaperones will be staying in each cabin. Each person will need to bring a sleeping bag, pillow, etc.

MEALS PROVIDED:

Saturday dinner, Sunday breakfast, and Sunday lunch. Please be sure to **eat lunch before** you arrive on Saturday.

ARRIVAL:

Arrival time - **1:00pm** on September 23rd. When you arrive, follow the signs to the Administration Building, check in, and we will direct you to your cabin. **Rehearsal starts at 2:00pm.**

DEPARTURE:

Parents - We will be ready to leave by **2:30pm** on Sunday afternoon. **PLEASE BE PROMPT!**

GENERAL INFORMATION:

If you take prescription medication, your chaperone must receive a note from your parents indicating proper dosage.

The weather in Prescott is unpredictable in the fall. Keep an eye on the weather forecast and pack accordingly. Be sure to pack some warm clothes.

You are welcome to bring non-perishable snack food.

WHAT TO PACK:

This sample checklist will help you as you are packing for the retreat:

- _____ Sleeping bag (or bedding) & pillow
- _____ Comfortable clothing - jeans, sweatshirt, sweaters, warm jacket, walking shoes, etc.
- _____ Towel & washcloth
- _____ Toiletries (soap, shampoo, toothbrush, toothpaste, contact lens supplies, etc)
- _____ Flashlight and extra batteries
- _____ Any necessary medication (remember - we need a note!)
- _____ Your instrument - plus extra strings, rosin, reeds, etc.
- _____ Cello/Bass: endpin strap & **Bass: stool**
- _____ Your MYS music (don't count on your stand partner!) and a pencil
- _____ A wire/portable MUSIC STAND (if you have one) - be sure your name is on all parts

DO NOT BRING:

Weapons of any kind or anything you cannot afford to lose!

AUTHORIZATION TO CONSENT TO TREATMENT OF A MINOR

**** Notary Required ****

I (We), the undersigned, parent(s) of _____ a minor, do hereby authorize Metropolitan Youth Symphony as agent(s) for the undersigned, to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon or dentist licensed under the provisions of the Medicine Practice Act (Dental Practice Act) on the Medical Staff of any hospital, whether such diagnosis or treatment is rendered at the office of said physician/dentist or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable. A photocopy of this authorization for care shall be as valid as the original document.

It is hereby understood that the consent and authorization hereby given and granted are continuing and are intended by me to extend throughout the current concert season.

My son/daughter is covered by the following insurance:

Insurance Company _____ Policy Number _____

Name of Insured _____ Individual Number _____

Name of Insured's Employer _____

Other _____

DATED
this (day) _____ of (month) _____, in (year) _____.

Parent (Legal Guardian) Signature

SUBSCRIBED AND SWORN TO

before me this (day) _____ of (month) _____, in (year) _____.

Notary Expiration Date

Notary Signature

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>>> TURN OVER >>>

MYS DIVISION 1 RETREAT

Permission/Verification Form – DUE: September 14, 2017

I have read the attached retreat information and give permission for my child to attend.

**** PLEASE SIGN BOTTOM ****

I understand that transportation to and from the retreat is my responsibility.

Name of MYS member: _____ Instrument: _____

My child will be attending the retreat

I (we) would like to attend the Retreat as a chaperone:

print name(s) _____ / _____

If you volunteer to chaperone, assume you will be going.
We will contact you with details in the week prior to the retreat.

My child will be unable to attend the Retreat _____
(reason)

Because your child will be missing over 7 hours of valuable rehearsal time, a separate absence form **MUST BE** submitted with this form for each day missed (one for Saturday and/or one for Sunday). See your rehearsal aide. These will be considered unexcused absences if the form(s) are not completed before the retreat.

Transportation

Parent Phone #: _____ Alt Phone #: _____

_____ I will be taking my child TO the retreat

_____ I will be bringing my child home FROM the retreat

_____ My child will be traveling TO the retreat with _____

_____ My child will be returning home FROM the retreat with _____

Dietary Restrictions & Allergies

_____ My child has no dietary restrictions or allergies

_____ My child has the following dietary restrictions and/or allergies (also list any medication):

Signed: _____
(parent(s)/legal guardian)

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CAMP SCHEDULE:

(subject to change)



Saturday Activities – September 23, 2017

- 1:00 pm Arrive at Sky-Y Camp; check in – Admin Building
- 2:00 pm Orchestra rehearsal – Holmes Hall
- 3:30 pm Orientation & break
- 3:45 pm Rehearsal resumes – Holmes Hall
- 5:00 pm Free time
- 5:30 pm Dinner - Lincoln Lodge/Dining Hall
- 7:00 pm Orchestra rehearsal – Holmes Hall
- 8:30 pm PHORCED FUN
- 9:30 pm Be in cabin
- 10:00 pm Taps - Lights out!!/Quiet hours begin

Sunday Activities – September 24, 2017

- 7:00 am Reveille - Wake up! Quiet hours end
- 8:00 am Breakfast - Lincoln Lodge/Dining Hall
- 8:45 am Devotional service (attendance optional) - Admin Building
- 9:30 am Sectionals – Holmes Hall/Admin Building/Dodge Hall
- 11:30 am Free time
- 12:00 pm Lunch - Lincoln Lodge/Dining Hall
- 12:45 pm Orchestra rehearsal – Holmes Hall
- 2:00 pm Clean up cabins/grounds; Prepare to check out
- 2:30 pm Depart camp – **PARENTS: please be on time**

Optional Devotional Service

Sunday Devotional Schedule (optional for members that normally attend church and want a service)

**Notify the office via email at execdirector@azmys.org if you plan to participate

- Retreat Devotional Service
- Prayer
- Scripture
- Musical Selection(s)
- 5 min non-denominational inspirational lesson/speech/poem
- Musical Selection
- Closing Prayer