

**The Royal School of Church Music Rhode Island (Newport) Course  
for Girls, Boys, Teens, and Adults  
July 25 - July 31, A.D. 2022**

**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

Have you previously attended RSCM Courses? Yes \_\_\_\_\_ No \_\_\_\_\_

Birth Date \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_  
Name Phone number(s)

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

**Voice Part:** Alto (All Adult women sing Alto) Tenor Bass Baritone **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**

**Registration Fee: RSCMA Member (before March 1): \$675**

**RSCMA Non-Member (before March 1): \$700**

**All Registrations received after March 1: \$720**

***Max of 120 singers total (80 boys and girls; 40 adults).***

**Adult Day Participants: \$575 if registered before March 1, 2022 or**

**\$600.00 if received after March 1, 2022.**

***Early registration is encouraged to reserve your place!***

Please mail completed registration form and check deposit to:

Ms. Susan E. O'Brien, Course Registrar  
23 Amvets Ave.  
Falmouth, MA 02540

***Please write checks to "RSCM Newport Course."***

**Adult participants must complete the Self-Declaration form attached and have two reference forms sent to the course manager, *unless we received those forms in 2019 or 2020*. If we received those forms in 2019 or 2020, only this first sheet is needed this year. Otherwise, please complete all forms.**

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: \_\_\_\_\_

**Adult Declaration Form, page 2**

**7. RSCM EVENTS/ACTIVITIES**

Please list your prior RSCM course experience - venues and dates:

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

8. Do we have your permission to run a criminal background check? Yes \_\_\_\_\_ No \_\_\_\_\_  
(Required of all adult participants.)

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.**

**CONFIDENTIAL**

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 Newport 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 Newport Course. In addition, I specifically agree to indemnify and hold harmless, Salve Regina University, The Royal School of Church Music, Newport 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 Salve Regina University and The Royal School of Church Music, Newport 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 Co-Managers, **Mr. Vincent Edwards/Mr. Rodney Ayers, 300 Westminster Street, Providence, RI 02903** 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) \_\_\_\_\_