



541 Luck Avenue, Suite 325, Roanoke VA 24016  
p:| 540-685-2309 f:| 540-343-3744  
w:| www.jeffcenter.org/musiclab  
e:| [jharman@jeffcenter.org](mailto:jharman@jeffcenter.org)

Please complete, sign and return this form to Jordan Harman, either via fax, e-mail (signed & scanned) or mail. Once an application and payment have been received, please allow 7-10 business days for processing.

**APPLICATION FORM FALL 2017-2018**

Dates & Hours (subject to change)

**Year 2017-2018**(Monday, August 28, 2017 - Friday, June 1, 2018) **Open Lab Hours** 3 days/week (M,W,Th) 3:00 - 7:00 PM

**Music Lab at Jefferson Center - General Information: (PLEASE PRINT)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: Male: \_\_\_ Female: \_\_\_

Name of School/ School Program: \_\_\_\_\_

Type of School: Public School: \_\_\_ Private School: \_\_\_ Home School: \_\_\_ Grade Level: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ City Address: \_\_\_ County Address: \_\_\_

Home Number: \_\_\_ - \_\_\_ - \_\_\_ Cell Number: \_\_\_ - \_\_\_ - \_\_\_ Work Number: \_\_\_ - \_\_\_ - \_\_\_

E-mail: (please provide) \_\_\_\_\_

**Parent/Guardian: (PLEASE PRINT)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Home Number: \_\_\_ - \_\_\_ - \_\_\_ Cell Number: \_\_\_ - \_\_\_ - \_\_\_ Work Number: \_\_\_ - \_\_\_ - \_\_\_

E-mail: (please provide) \_\_\_\_\_

I, \_\_\_\_\_ / \_\_\_\_\_ (**print & sign name**), have read the Music Lab rules, guidelines, policies and procedures and hereby agree to respect and abide by all conditions set forth.

**Media Release** (if you prefer to opt out of the media release, please speak with Jordan Harman, Education Director, directly at 540-685-2309) I hereby grant Jefferson Center the right to use, reproduce, distribute and/or transmit photographs, videotape and/or recordings of me, in whole and in part, and permit the use of my name in conjunction with these materials. I acknowledge that such photographs, videotape and/or recordings of me and any associated materials, printed, electronic, or other may become part of copyrighted materials that Jefferson Center may distribute to others in furtherance of its educational mission.

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Member Name – Print

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Member Signature

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Date

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Parent Name – Print

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Parent Signature

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Date

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Jordan Harman, Director

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Date



Student Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Music Lab at Jefferson Center - Payment/Enrollment Information:**

I would like to attend:

\_\_\_\_\_ 2017-2018 Music Lab Full Year (August 28, 2017 – June 1, 2018) \$225.00

\_\_\_\_\_ 2016 Music Lab Fall Semester Only (August 28, 2017 – December 15, 2017) \$125.00

**ADDITIONAL DONATION**

I would like to make an additional donation to the Music Lab of \$ \_\_\_\_\_.

The Music Lab at Jefferson Center is a 501C3 nonprofit organization. Contributions may be tax deductible to the maximum extent of the law.

**METHOD OF PAYMENT**

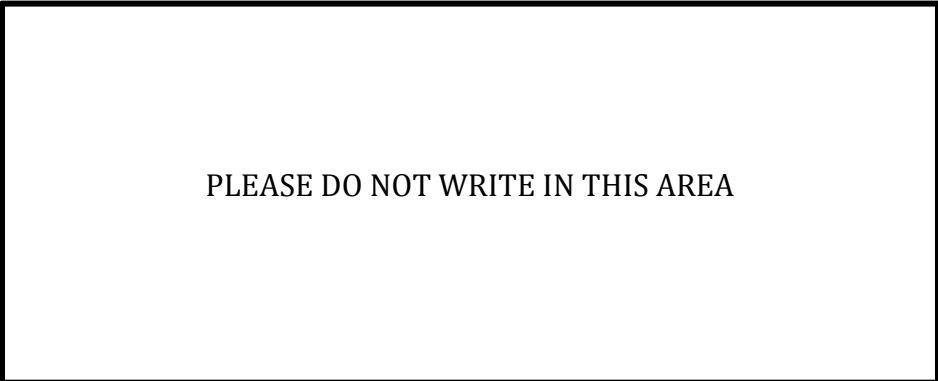
\_\_\_\_\_ Cash / \_\_\_ Check (make checks payable to Jefferson Center Foundation w/ “Music Lab” in memo line)

Credit Card (check one): \_\_\_ Mastercard \_\_\_ Visa \_\_\_ Discover \_\_\_ American Express

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_ / \_\_\_ Billing Zip Code: \_\_\_\_\_

**Payments can be made Monday-Friday from 8:30am to 4:30pm or mail application with check to:**

**Jefferson Center  
541 Luck Ave SW Suite 221  
Roanoke VA 24016**



**FINANCIAL ASSISTANCE** (for those **NOT** needing financial assistance, you may skip this section)

\_\_\_\_\_ In order to attend I will need financial assistance and would like to apply for a scholarship.

**If you checked the box above**, the parent or guardian **must** provide and attach a statement (preferably one page or less) indicating the circumstance(s) requiring you to seek financial assistance.

In addition to considering your statement, financial assistance is based on availability and Music Lab membership capacity. A meeting will be scheduled with student, parent or guardian and Cyrus Pace or other Music Lab personnel to discuss scholarship opportunities and conditions.

Are you able to make any financial contribution to offset your membership fee? \_\_\_ Yes \_\_\_ No

**If you answered “Yes” to the above question**, please indicate how much you can contribute **per year** toward your membership: \$ \_\_\_\_\_

## Music Lab at Jefferson Center - Policies

1. You must be in 6th through 12th grade and currently enrolled in school or home schooled (certified by parent) to enroll at the Music Lab. (\*occasionally members outside these ages may be accepted, please contact Jordan Harman directly to inquire about special memberships)
2. Profanity, racial slurs, or references to sex, drugs and/or violence are strictly prohibited. Clean and appropriate language must be used at all times. This applies to both recordings and member conduct while at the Music Lab.
3. The possession, use, or influence of drugs, alcohol, or tobacco products are strictly prohibited and will result in immediate suspension or expulsion.
4. Violence, vandalism, assault, or any other criminal behavior, including the possession of weapons, is strictly prohibited and will result in immediate suspension or expulsion.
5. Disruptive or disrespectful behavior is not allowed anywhere inside or on the property of Jefferson Center.
6. Members are required to respect all equipment (hardware, electronic, etc.) within the Music Lab. It is a privilege, not a right, to have access to the Music Lab equipment. Therefore any misuse of the Music Lab equipment could result in immediate suspension or expulsion. This includes, but is not limited to viewing or downloading inappropriate material on the Music Lab computers or destructive treatment of music/recording equipment.
7. Loitering is strictly prohibited outside or near Jefferson Center or in the surrounding neighborhood.
8. Members are not allowed to access other rooms or offices in Jefferson Center other than restrooms and the rooms/studios in Suite 325, specifically the Music Lab.
9. Food is NOT allowed inside any room or studio within the Music Lab. Drinks may be consumed in the lobby.
10. Members must keep their respective workstation area/room clean and free from clutter.
11. Public or inappropriate displays of affection are strictly prohibited.
12. Friends or guests that are not Music Lab members must be approved in writing by the director at least 48 hours prior to their arrival. Any friend or guest is limited to three total visits per semester before either being required to become a member and/or attend orientation.
13. Maximum occupancy limits for each room will be strictly enforced.
14. Members who do not attend school are not allowed to come to the Music Lab for that day. Staff members may perform random attendance checks.

Failure to abide by Music Lab policies may result in me being excluded from performances and/or recordings, suspension, and/or expulsion. These consequences are determined by the director per incident. I have read and understand the Music Lab Expectations and Policies. I agree to support the staff of the Music Lab in enforcing these expectations and policies. I understand that I, or my child, may be removed from the program for infractions.

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Member Name – Print

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Member Signature

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Date

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Parent Name – Print

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Parent Signature

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Date

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Jordan Harman, Director

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Date

Music Lab at Jefferson Center - Emergency/Medical Information

Contact Number(s):

Name: \_\_\_\_\_ Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name: \_\_\_\_\_ Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Please list any medical conditions, allergies or other concerns we should be aware of:

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Demographic Information (Though optional, this information could help the Music Lab at Jefferson Center acquire grant funding.) Student Ethnicity:

Black: \_\_\_ White: \_\_\_ Hispanic: \_\_\_ Asian: \_\_\_ Multi-Racial: \_\_\_ American Indian or Alaska Native: \_\_\_  
Native Hawaiian or Other Pacific Islander: \_\_\_

Other (Specify): \_\_\_\_\_

Is English the second language of the student? Yes: \_\_\_ No: \_\_\_

Are other languages spoken in the home? Yes: \_\_\_ No: \_\_\_

If so, list them here: \_\_\_\_\_

# Music Lab at Jefferson Center - Music Ability and Interest Survey

## **Check favorite genres of music:**

Rock: \_\_\_ Hip-Hop: \_\_\_ R&B: \_\_\_ Soul: \_\_\_ Jazz: \_\_\_ Blues: \_\_\_ Indie: \_\_\_ Metal: \_\_\_ Dance: \_\_\_  
Electronic: \_\_\_ Classical: \_\_\_ Punk: \_\_\_ Folk: \_\_\_ Country: \_\_\_ Hardcore: \_\_\_ Bluegrass: \_\_\_  
Other: \_\_\_\_\_

**List favorite artists/performers:** \_\_\_\_\_

## **How did you hear about the Music Lab?**

Music Lab Website: \_\_\_ Facebook: \_\_\_ Soundcloud: \_\_\_ Snapchat: \_\_\_ Instagram: \_\_\_ At Jefferson Center: \_\_\_  
Word of Mouth: \_\_\_ Printed Ad: \_\_\_ Newspaper Article: \_\_\_ Other Publication: \_\_\_

**Do you play a musical instrument(s)?** Yes: \_\_\_ No: \_\_\_ If so, list below:

Instrument: \_\_\_\_\_ Years Played: \_\_\_\_\_ School: \_\_\_ Private Lessons: \_\_\_

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Instrument: \_\_\_\_\_ Years Played: \_\_\_\_\_ School: \_\_\_ Private Lessons: \_\_\_

## **Check Music Lab Services you are interested in:**

Songwriting Classes & Workshops: \_\_\_

Visiting Artists: \_\_\_

Digital Audio Workstation Recording: \_\_\_

Music Business Classes: \_\_\_

Audio Production Classes & Workshops: \_\_\_

Connect with Other Musicians: \_\_\_

Music Camps: \_\_\_ Live Performances: \_\_\_

Music Theory Workshops: \_\_\_

## **List the top two things you would like to gain through the Music Lab:**

#1: \_\_\_\_\_

#2: \_\_\_\_\_

Feel free to share any other details about your musical background and training on the back of this application.