

RAGC Registration Information

The Rochester Area Girls Choir is a non-profit organization that was created in 1978 by Diane Toogood and her late husband, Roger, to carry out the ideals listed in our mission statement. Diane is a keyboardist, a freelance performer, a teacher, a vocalist, and a trainer of musicians of all ages.

Lorie Leske joins Diane in directing the RAGC. Lorie is a director and vocalist with 12 years experience as a director and 22 years as a vocalist. Lorie has a passion for music and loves working with young people of all ages.

Our Mission:

- To promote the love of singing, music, and the abilities of young girls to cooperate and work together in a group.
- To help the girls learn more about the Rochester community while singing at area churches, conventions, community functions, and senior citizen groups.
- To learn a variety of contemporary, sacred, folk, popular, and classical music.

Weekly Rehearsal:

Tuesday afternoons at Lourdes High School (621 W. Center Street, Rochester, MN) beginning in September and continuing through May. This is a weekly commitment made by each choir member. Remember our choir is a TEAM effort. We need all voices. Attendance is taken at every rehearsal and event. Please call Cheri Uecker at 282-2419 if unable to attend. Should more than 4 rehearsals be missed, we will need to reassess your commitment to the choir.

Schedule of Rehearsal and Prospective Performances:

Please consult the RAGC website www.rochesterareagirlschoir.org for current schedule.

Performance Uniform Requirements:

The choir has two performance uniforms. We will designate which uniform should be worn for the performance.

Casual Uniform:

1. Choir T-shirt for both choir groups (included in membership fee)
2. Plain ankle-length black slacks (No holes, patches, piping, printed designs, etc.)
3. White canvas tennis shoes (No sandals or slip-ons)
4. White socks - no other color, no bare feet

Formal Uniform:

1. Black long choir dress purchased through RAGC Cost of new dress: \$56.00
2. Black pantyhose or knee-high hose. No other color or bare legs
3. Black Ballet shoes, flat

How to Join:

Contact Lorie Leske, 286-8598 or Diane Toogood, 289-6644 and arrange for an audition. No advance preparation necessary.

Complete the registration and health form, sign and return with payment to:

Gini VanKeulen, RAGC Treasurer
3005 15th St. SE
Rochester, MN 55904

Visit the RAGC website online at
www.rochesterareagirlschoir.org

2009-2010 Season RAGC Membership Registration Form

Girls Name _____ Home phone _____

Mailing Address _____

City _____ State _____ Zip Code _____

E-Mail Address _____

Age ____ Grade in September, 2009 ____ School _____ Birth Date _____

Extracurricular activities _____

Father Name _____ Work phone _____ E-Mail _____

Mother Name _____ Work phone _____ E-Mail _____

Emergency contact: (we will attempt to reach parents first)

Name _____

Relationship to choir member _____ Phone _____

2009-2010 Registration Fee is \$225 for all girls

Checks are payable to:

Rochester Area Girls Choir (RAGC)

NO REFUNDS

Please check one: ____ Pay \$225 now. Full registration payment

____ Pay \$125 now with remaining balance of \$100 due by September 22, 2009.

I understand that rehearsals are held on Tuesday afternoons at Lourdes High School; 621 W. Center Street, Rochester and that I should be there ready to sing at the starting time. I know that attendance at rehearsals is important and if I can't attend, I am to call Cheri Uecker at 282-2419 or any other board member. Should more than 4 rehearsals be missed, I may be asked to leave the choir.

I understand that I am responsible for:

- * Purchasing a formal performance uniform and keeping it in good condition.
- * I will be issued a music folder which I will keep in excellent condition and bring to every rehearsal. If lost or returned in poor condition I will reimburse RAGC \$50.00.

Signature of singer _____ Date _____

Signature of parent _____ Date _____

(PLEASE COMPLETE MEDICAL HISTORY ON REVERSE SIDE)

ROCHESTER AREA GIRLS CHOIR - Health History & Medical Release

Name of Family Physician _____

Physician's Address _____ Phone # _____

Medical/Hospital Insurance Company _____

Policy Number _____

Illness/Injuries (check those that apply and give dates):

_____ Ear Infection	_____ Bleeding/Clotting Disorders
_____ Asthma	_____ Musculoskeletal Disorders
_____ Heart Defect	_____ Seizures
_____ Diabetes	_____ Headaches
_____ Other (specify) _____	

Allergies (Check those that apply and specify the nature of the reaction)

Animals _____	Hay Fever _____
Pollen _____	Food _____
Medicines _____	Insect Stings _____
Plants _____	Other _____

Other Health Conditions (check those that apply):

_____ Motion sickness	_____ Special Dietary Regimen
_____ Nosebleeds	_____ Menstrual Cramps
_____ Fainting	_____ Wears Contacts or glasses
_____ Sleep disturbances (talking and/or walking)	

Date of last Tetanus shot: _____

List any medications currently taken, dosage frequency, and for what condition. Please notify if there is a change in

medication: _____

Please give any other information that would be useful to the adult in charge in relation to any mentioned health condition: _____

Medical Consent:

The above named youth's (henceforth referred to as "The Student") medical conditions stated on this medical form are complete and correct. I realize that an emergency may come up while The Student is at a Rochester Area Girls Choir (RAGC) function (including but not limited to: rehearsal, concert, tour, or camp) Should this happen, I know the choir will attempt to contact myself or the emergency contact. However in the interest of the The Student's well being and safety, I hereby authorize, give consent for, and delegate the RAGC Director or their agent the authority to consent to any examination, diagnosis, and treat or secure proper treatment for The Student as the physician shall determine is proper and necessary under the circumstances.

Parent/Guardian Authorization:

I have been informed of the nature of the Rochester Area girls Choir of which The Student is a member. With this knowledge, I grant permission for The Student to participate in all RAGC activities, on behalf of the undersigned and The Student, I accept and assume the risk and full responsibility for injury, illness, loss of personal property or other damage, and all medical and other expenses resulting from participation. I hereby release and discharge Rochester Area Girls Choir and their agents from liability to us, the undersigned, and to The Student for any and all losses, damages, and expenses, and any injury to person or property resulting from The Student's participation in the RAGC program.

Parent/Guardian signature _____ **Date** _____

Please note: Failure to sign this form will result in the singer not being allowed to participate in the Rochester Area Girls Choir.