



**Session 1: Sunday, June 10<sup>th</sup>/4pm–Thursday, June 14<sup>th</sup>/8am (Camp McDowell—Adults Emphasis)**  
**Session 2: Monday, July 2<sup>nd</sup>/4pm – Friday, July 6<sup>th</sup>/9am (Camp Lee—Youth Emphasis)**

The Sacred Harp Musical Heritage Association will hold Camp Fasola for learning Sacred Harp singing, history, and traditions for the tenth consecutive year. Camp Fasola is open to both youth and adults, beginners and experienced singers. Multiple daily sessions will be devoted to teaching Sacred Harp singing, as well as times for recreation, rest, fellowship, and singing. All campers will be expected to perform some area of service during the week. More than 200 campers attended in 2011.

Sleeping quarters at Camp McDowell (Adult Camp) are motel style rooms with two full beds (linens provided) and private bathroom. (Camp fee is for double occupancy. Add \$150 for single occupancy / subject to availability.) Sleeping quarters at Camp Lee (Youth Camp) are lodge style with bunk beds (linens not provided) and community bathrooms (separate lodges for males and females). The camp fee covers four nights air-conditioned lodging and meeting rooms, eleven meals, snacks, t-shirts, lessons, and activities. Camp fee for guests not participating in the Sacred Harp activities is an additional \$200. Reservations are available on a first come / first served basis with a deposit of \$50. We are unable to accommodate campers 6-9 years of age without a parent/guardian who will be responsible for supervising them around the clock. (You should expect that this will require taking housing in a hotel at your expense). Travel to camp is the responsibility of campers. Please note that singings are held nearby on the weekends before and after both sessions of camp.

*Preliminary Daily Schedule*

<i>Time</i>	<i>Adult Session</i>	<i>Youth Session</i>
8:00 AM	Breakfast	Breakfast
8:45 AM	Free Time	Free Time
9:00 AM	Singing School Lesson	Singing School Lesson
10:15 AM	Recess-Snack	Recess-Snack
10:30 AM	Recreation or Elective Lesson	Recreation: Canoeing, Rock Slide, Zip Line or Elective
12:00 PM	Lunch	Lunch
12:45 PM	Rest	Rest
1:00 PM	Singing School Lesson	Singing School Lesson
2:30 PM	Recreation or Elective Lesson	Recreation: Swimming, Hiking, Crafts, Exercise or Elective
3:45 PM	Recess-Snack	Recess-Snack
4:00 PM	Singing School Lesson	Singing School Lesson
5:00 PM	Recreation or Elective Lesson	Recreation / Free Time or Elective
6:00 PM	Dinner	Dinner
6:45 PM	Free Time	Free Time
7:30 PM	Class Singing	Class Singing
8:45 PM	Devotional	Devotional
9:00 PM	Free Time	Free Time
9:45 PM	Report to Quarters	Report to Quarters
10:30 PM	Lights Out	Lights Out

Nearby Singings Before and After Camp Fasola Session 1

Saturday and Sunday, June 9 & 10 – Hopewell Homecoming – Hopewell Church – Oneonta, Alabama  
 Sunday, June 10 – Alpharetta Singing – Alpharetta, Georgia  
 Sunday, June 10 – Oak Springs Church – Calhoun County, Mississippi  
 Sunday, June 10 – Aldridge Memorial – Johnson Schoolhouse – Fayette County, Alabama  
 Thursday, Friday, and Saturday, June 14-16 – National Convention – First Christian Church – Birmingham, Alabama  
 Saturday, June 16 – Addington Chapel – Cullman County, Alabama  
 Sunday, June 17 – Hopewell Primitive Baptist Church – Ephesus, Georgia  
 Sunday, June 17 – Clifford Wakefield Memorial – King School House – Winston County, Alabama  
 Sunday, June 17 – Macedonia Primitive Baptist Church – Section, Alabama

Nearby Singings Before and After Camp Fasola Session 2

Saturday, June 30 – Mount Herman Primitive Baptist Church – Calhoun County, Mississippi  
 Saturday and Sunday, June 30 & July 1 – Henagar-Union Convention – Liberty Church – Henagar, Alabama  
 Sunday, July 1 – Crossroads Baptist Church – Tallapoosa, Georgia  
 Monday, July 2 – Independence Day Singing – 9:00 a.m. – Camp Lee  
 Saturday, July 7 – Flat Shoals Primitive Baptist Church – Stockbridge, Georgia  
 Saturday and Sunday, July 7 & 8 – Cullman County Convention – Courthouse – Cullman, Alabama  
 Sunday, July 8 – Hardeman Primitive Baptist Church – J.L. White Book – Decatur, Georgia

**APPLICATION FORM – CAMP FASOLA 2012**

<b>SESSION (Select one):</b> ___ June 10-June 14 @ Camp McDowell (Adult Emphasis)    Adult \$450 / Youth \$250 ___ July 2-July 6 @ Camp Lee (Youth Emphasis)                     Adult \$400 / Youth \$200
---

**(Age 19+)**

NAME \_\_\_\_\_ M\_\_ F\_\_                     INSURANCE PROVIDER \_\_\_\_\_  
 ADDRESS \_\_\_\_\_                             INSURANCE POLICY NUMBER \_\_\_\_\_  
 \_\_\_\_\_     DATE OF BIRTH \_\_\_\_\_ T-SHIRT SIZE \_\_\_\_\_  
 NAME FOR BADGE \_\_\_\_\_                     ALLERGIES/OTHER INFO \_\_\_\_\_  
 PHONE \_\_\_\_\_                                 EMAIL \_\_\_\_\_  
 EMERGENCY CONTACT \_\_\_\_\_                 MEDICATIONS \_\_\_\_\_  
 WHY YOU WANT TO ATTEND CAMP \_\_\_\_\_

**(Adult) Release for Medical Treatment and Liability and Agreement to Camp Rules**

I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of the camper. Knowing that participation in camp activities may result in injuries, I/we hereby waive, release, absolve, indemnify and agree to hold harmless the Sacred Harp Musical Heritage Association, Camp Lee, Camp McDowell, their affiliated organizations, sponsors, employees, and volunteers, including the owners of the facilities utilized for the activities from any claim by or on behalf of the camper arising out of any injury whether the result of negligence, or for any cause as a result of the camper’s participation in the programs and /or being transported to or from the same, which transportation I hereby authorize. I agree to follow safety and participation rules of Camp Lee/Camp McDowell and Camp Fasola.

Adult Camper Signature: \_\_\_\_\_ Date \_\_\_\_\_

**MINOR (Age 18 and under)**

NAME \_\_\_\_\_ M\_\_ F\_\_                     INSURANCE PROVIDER \_\_\_\_\_  
 ADDRESS \_\_\_\_\_                             INSURANCE POLICY NUMBER \_\_\_\_\_  
 \_\_\_\_\_     DATE OF BIRTH \_\_\_\_\_ T-SHIRT SIZE \_\_\_\_\_  
 NAME FOR BADGE \_\_\_\_\_                     ALLERGIES/OTHER INFO \_\_\_\_\_  
 PARENT’S PHONE \_\_\_\_\_                     PARENT’S EMAIL \_\_\_\_\_  
 PARENT’S NAME \_\_\_\_\_                     MEDICATIONS \_\_\_\_\_  
 WHY YOU WANT TO ATTEND CAMP \_\_\_\_\_

**(Minor) Release for Medical Treatment and Liability**

As the parent or legal guardian of the above named camper, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent. I/We the parent/guardian of the above named camper, a minor, hereby give my/our approval for said registrant to participate in any and all Camp Fasola activities, including transportation to and from the activities. Knowing that participation in camp activities may result in injuries, I/we hereby waive, release, absolve, indemnify and agree to hold harmless the Sacred Harp Musical Heritage Association, Camp Lee, Camp McDowell, their affiliated organizations, sponsors, employees, and volunteers, including the owners of the facilities utilized for the activities from any claim by or on behalf of the camper arising out of any injury whether the result of negligence, or for any cause as a result of the camper’s participation in the programs and /or being transported to or from the same, which transportation I hereby authorize. I agree for my youth to follow safety and participation rules of Camp Lee/Camp McDowell and Camp Fasola.

Parent/Guardian of Minor Camper Signature: \_\_\_\_\_ Date \_\_\_\_\_

-----  
 ADULT CAMP: # \_\_\_\_\_ Age 30+ \$450 = \$ \_\_\_\_\_                     # \_\_\_\_\_ Age 29&under \$250 = \$ \_\_\_\_\_                     TOTAL FEES = \$ \_\_\_\_\_  
 -----

YOUTH CAMP: # \_\_\_\_\_ Age 30+ \$400 = \$ \_\_\_\_\_                     # \_\_\_\_\_ Age 29&under \$200 = \$ \_\_\_\_\_  
 -----

DEPOSIT = \$ \_\_\_\_\_ Make check payable to *SHMHA Camp Fasola* and mail to the address below. The balance of all fees is due by May 31.  
 -----

ROOMMATE REQUEST (ADULT SESSION only): \_\_\_\_\_

COMMENTS: \_\_\_\_\_