



Appleton Area School District

Summer Band Camp

For students entering their second year of playing through Grade 9

Contacts

Band Camp Coordinator: Matt DiPietro • dipietromatthe@aad.k12.wi.us
Coordination Specialist: Karrie Kadolph • kadolphkarrie@aad.k12.wi.us
Summer School Director: Todd Kadolph • kadolphtodd@aad.k12.wi.us
Summer School Office: (920) 852-5332

Camp Details

Band camp is for students going into 6th-9th grade who have at least one full year of formal instruction on their band instrument. The week of camp is a fun opportunity for band students from around the Fox Valley to work together in full band and sectionals. Sectionals are led by an expert on each instrument. All students receive a camp t-shirt. On the last day of camp each section and each band perform in concerts open to families. Band camp provides an exciting challenge as well preparation for the coming school year.

Class Locations, Dates, Times, Fees

Dates/Time: August 3rd-7th, 2026 Monday–Thursday 8:30 am–2:15 pm, Friday 8:30am-12:30pm
Location: Appleton North High School
Fee: \$20, payable on the portal or with the registration paperwork

Camp Lunch Information

Students will have an opportunity to order Papa John's pizza for lunch Monday through Thursday. Students may also bring lunch with them. We will also have water and soda available for purchase each day.



Registration Details

Registration will be conducted online through the School Store on the Parent Portal

- Directions for registration can be found by clicking here or at <https://www.aasd.k12.wi.us/families/education-resources/summer-school/courses-camps-classes>
- Out of district students should return the paper registration form
- Registration deadline is June 5, 2026
- Each student enrolled will receive an email in July with more details and schedules for band camp





Appleton Area School District

Summer Band Camp Registration Form

(Only for families NOT using online registration.) Turn in completed forms to the school your child will attend.

Student Information

- Student Name: _____
- Gender: M F
- Date of Birth: _____
- Address: _____ Apt: _____
- City: _____ Zip: _____
- School Next Fall: _____ Grade Next Fall: _____

Parent/Guardian Information

- Primary Phone Number to Contact (Available 8:30–2:15): _____
- Parent/Guardian 1: _____
Phone: _____ Email: _____
- Parent/Guardian 2: _____
Phone: _____ Email: _____

Student Support & Health

- IEP/504/Intervention Plan? Yes No
If yes, explain: _____
Note: Summer classes do not implement IEP services per WI DPI. <https://www.aasd.k12.wi.us/programs-services/services/special-education/current-families/summer-school-participation-for-students-with-disabilities>

Health Concerns/Medical Needs: _____

- Medications at Summer School? Yes No
If yes, list: _____
Reason: _____
Administration: Daily As Needed Emergency
- *Bring medications to the Site Coordinator on the first day.*

Music History

- Main Instrument Played: _____
- Number of Years of Formal Instruction: _____

T-Shirt Size: (Circle One) Adult Sm Adult Med Adult Lg Adult Extra Lg

Authorization

I authorize summer school personnel to obtain emergency medical care for my child if needed.

Parent/Guardian Signature: _____

Questions? Contact the Summer School Office: (920) 852-5332

Complete this form and return it to: **Summer Band Camp Registration C/O Matt DiPietro**
225 N Badger Ave
Appleton, WI 54914

Office use only: Registration received on ___/___/___, Amount paid \$_____ Cash or Check # _____