

# GIRLS SOCCER – FALL ID CLINIC 2

## Camper Information Packet

		Session Times
<b>Date</b>	Monday, October 10, 2016	8:45am – 3:00pm
<b>Location</b>	Plummer Field (Roberts Stadium)	Plummer Field (Roberts Stadium)
<b>Notes</b>	<p><b><i>Campers should arrive at least 15 minutes prior to the session start time.</i></b></p> <p><b><i>Campers must bring their own lunch.</i></b></p> <p><b><i>All Campers must sign-in and sign-out with a member of the camp staff.</i></b></p>	

### **DIRECTIONS TO CAMPUS**

There are no physical addresses for any of Princeton’s Athletic Facilities. If you are unfamiliar with campus, we recommend you visit <http://g.co/maps/qta3f> to get directions to the check-in/check-out location.

### **PARKING (see attached map)**

Parking will be available in Lot #20 which is the closest available parking to registration.

### **CANCELLATION POLICY**

All requests for refunds must be made online at [www.princetonportscamps.com/info/refund.htm](http://www.princetonportscamps.com/info/refund.htm).

### **SEVERE WEATHER**

In the event we have to cancel a clinic session due to severe weather, we will attempt to contact you using the information provided on your registration form. We will also post cancellation notices on our website.

### **CAMP CONTACT PHONE NUMBER**

Camp Office (9am – 5pm, Monday-Friday) 609.258.3369

### **REQUIRED EQUIPMENT**

All campers must provide their own equipment. Please make sure you have these items prior to your arrival as we do not have equipment to rent or borrow.

- |  |  |
|--|--|
| <input type="checkbox"/> Cleats<br><input type="checkbox"/> Turf Shoes/Sneakers<br><input type="checkbox"/> Shin Guards<br><input type="checkbox"/> Soccer Socks<br><input type="checkbox"/> Soccer Ball<br><input type="checkbox"/> Water Bottle/Sports Drink | <input type="checkbox"/> Goalie Shorts/Pants*<br><input type="checkbox"/> Goalie Shirt*<br><input type="checkbox"/> Goalie Gloves* |
|--|--|

\*Only required for goalkeepers.

## **MEDICAL CARE**

It is absolutely essential that you be in good physical condition prior to camp. We will have a Health Director on staff to handle injuries that occur at camp; however they cannot treat pre-existing conditions.

## **REQUIRED FORMS**

Each participant is required to submit 2 forms at check-in in order to participate in camp. Below is a listing of the forms, including a brief description. Without these forms completed in their entirety, campers will not be permitted to participate in any camp activity.

### ***Parental Release Form***

The Parental Release Form must be completed and signed by the participant's parent/guardian and includes areas to list an emergency contact.

### ***Health Form***

The Health Form must be completed and signed by the camper's parent/guardian and covers the camper's medical history, insurance policy, allergies, medications and any limitations.

## **IMMUNIZATION REQUIREMENTS**

New Jersey Youth Camp Standards (N.J.A.C. 8:25) require campers to be immunized with the vaccinations required for child-care center, preschool or school attendance as appropriate for the camper's age, according to the immunization schedule found in N.J.A.C. 8:57-4. An immunization schedule can be found at <http://www.state.nj.us/health/cd/imm.shtml>.

*\*\*If your camper has not received immunizations because of religious beliefs, please attach a signed letter to the Health Form stating your families beliefs.\*\**

## **MEDICATIONS AT CAMP**

In accordance with N.J.A.C. 8:25-5.3(h), Princeton University will not administer medications of any type (prescription or over-the-counter) to camp participants of any age. Princeton University will not be held responsible for housing/storing medication(s). Parent(s)/Legal Guardian(s) and camp participants will be held responsible for administering and housing/storing medication(s) in a discrete place during camp.

We strongly recommend Parent(s)/Legal Guardian(s) of camp participants that have been prescribed medication(s) that are self-administered to treat potentially life-threatening conditions (ie. inhalers, EpiPen) meet with the Health Director during check-in to discuss their use.

## **CODE OF CONDUCT**

The Code of Conduct was signed during online registration. It outlines general expectations of the participant while attending a program at Princeton University as well as fees associated with lost items.



# PRINCETON SPORTS CAMPS

## PARENTAL RELEASE FORM

I, \_\_\_\_\_, am the legal parent/guardian of \_\_\_\_\_,  
(Parent/Guardian Name) (Camper Name)

and give permission for the camper to attend and participate in the Princeton University \_\_\_\_\_  
(Camp Name)

which will be held on \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_.

On behalf of the camper, the camper’s parents and/or legal guardian, I hereby:

1. agree to assume all risk of personal injury and property loss arising from participation in any camp athletic and recreational activities;
2. agree to hold harmless the camp staff, The Trustees of Princeton University, its trustees, officers employees, agents, representatives responsible for any injury or property loss sustained during participation in any camp athletic and recreational activities;
3. grant permission to the camp staff or medical personnel to render, or engage medical personnel to render, preventative, first aid and/or emergency treatment that they deem necessary to the camper’s health and well-being. I understand that reasonable effort will be made to contact me, or the emergency contacts listed below, prior to such action and any expenses incurred are at my expense;
4. agree to accept any decisions made by the camp staff in the termination of camp attendance;
5. grant The Trustees of Princeton University, its trustees, officers, agents, representatives, employees and students permission to videotape, photograph or otherwise record the camper and to use such recordings and biographical data in any media, on a perpetual basis, for all purposes consistent with Princeton University’s mission.

In consideration for permission for the camper to participate in the camp, on behalf of the camper, the camper’s parents and/or legal guardian, I release The Trustees of Princeton University, its trustees, officers, agents, representatives, employees and students from any and all claims which the camper, the camper’s parents and/or legal guardian, may have as a result or personal injury or property loss arising out of, or connected in any way with, their participation in any camp athletic and recreational activities.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

1<sup>st</sup> Emergency Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

2<sup>nd</sup> Emergency Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**BRING TO CHECK-IN. DO NOT MAIL OR FAX.**

**This form is required for each camp you are attending.**

**If you are attending multiple camps, please make enough copies to hand one in at each camp check-in.**



# PRINCETON SPORTS CAMPS

## HEALTH FORM

Camp Name & Session: \_\_\_\_\_ Camp Dates: \_\_\_\_\_ to \_\_\_\_\_

Camper's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Age: \_\_\_\_\_

### Insurance Information

Policy Holder's Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Does the camper currently have any of the following?

Allergies (list all): \_\_\_\_\_

Please provide any information about current physical, mental or psychological conditions that may affect the camper's ability to fully participate in the program: \_\_\_\_\_

Has the camper been hospitalized within the past 5 years?  No  Yes

If yes, please describe: \_\_\_\_\_

Is the camper currently taking any medications (prescription and over-the counter):  No  Yes

If yes, please list the drug(s) and dosage: \_\_\_\_\_

In accordance with N.J.A.C. 8:25-5.3(h), Princeton University will not administer medications of any type (prescription or over-the-counter) to camp participants of any age. Princeton University will not be held responsible for housing/storing medication(s). Parent(s)/Legal Guardian(s) and camp participants will be held responsible for administering and housing/storing medication(s) in a discrete place during camp.

We strongly recommend Parent(s)/Legal Guardian(s) of camp participants that have been prescribed medication(s) that are self-administered to treat potentially life-threatening conditions (i.e. inhalers, EpiPen) meet with the Health Director during check-in to discuss their use.

As of this date, has the camper received all immunizations required under N.J.A.C. 8:57-4?  No  Yes

New Jersey Youth Camp Standards require campers to be immunized with the vaccinations required for child-care center, preschool or school attendance as appropriate for the camper's age, according to the immunization schedule found in N.J.A.C. 8:57-4. An immunization schedule can be found at <http://www.state.nj.us/health/cd/imm.shtml> Campers who do not comply with this schedule will not be allowed to participate in camp.

*I am the legal parent/guardian of the above named participant. I hereby certify that to the best of my knowledge, the information requested is complete and correct.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

**BRING TO CHECK-IN. DO NOT MAIL OR FAX.**

**This form is required for each camp you are attending.**

**If you are attending multiple camps, please make enough copies to hand one in at each camp check-in.**

**CODE OF CONDUCT**

- Treat others with kindness and respect and only use appropriate language and gestures.
- Bullying, hazing, sexual misconduct, and violence of any kind toward others are strictly prohibited. If observed, must be reported to a staff member immediately.
- Respect personal property of others and do not take or use anything that does not belong to you.
- Possession or use of illegal substances (including drugs) or any legal substance illegally (including alcohol, tobacco and prescribed medications) is strictly prohibited.
- Possession of any functioning, non-functioning or prop weapon or firework is strictly prohibited.
- Cell phones and other valuables may be brought to campus; however Princeton University will not be responsible for damaged, lost or stolen items.
- Switching assigned dormitory room without authorization from Conference & Event Services is strictly prohibited.
- Access to Princeton University facilities is limited to scheduled program activities. Rooftops, balconies and construction areas are off limits at all times. Fire escapes and ladders may only be used in the event of an emergency.
- Misuse or damage of Princeton University property is prohibited. Fees will be assessed against participants responsible for damaged or missing Princeton University property.
- Room access cards, building access cards and meal cards issued to a participant must be returned by that person in person at the designated check-out location. Fees will be assessed for any item not returned as follows; room access card - \$100.00, building access card - \$50.00, meal card - \$25.00.

**AUTHORIZED PICK-UP**

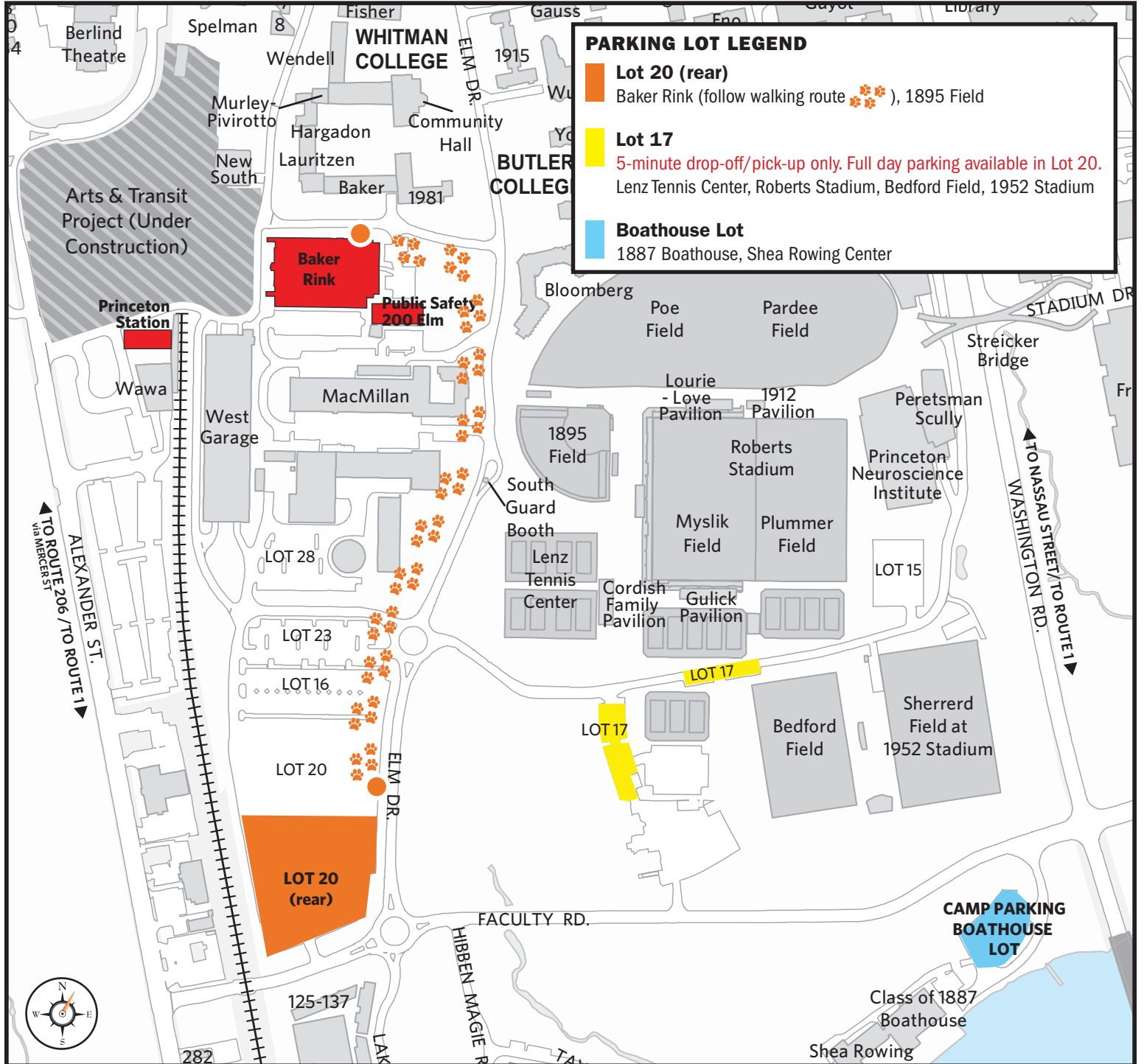
Parents/Guardians that do not wish to have their child(ren) return their issued items and sign themselves out of the program on the last day must e-mail ([camps@princeton.edu](mailto:camps@princeton.edu)) the name and phone number of authorized individual(s) that may sign their child(ren) out of the program and return any issued items. Notice must be received at least 2 days prior to the start of the program. If notice is not received at least 2 days prior to the start of the program, we will permit your child(ren) to sign themselves out of the program on the last day and return any issued items.

*I have read, understand and accept the above Code of Conduct and Authorized Pick-Up and will make sure that my child reads, understands and accepts the above Code of Conduct. I understand that failure by my child(ren) to comply with the Code of Conduct may result in their removal from the program and/or additional fees and that I may be asked to pick up my child(ren) from campus. I understand that if my child is asked to leave the program, I will receive no refund.*

**This document was signed digitally during online registration.  
This copy is for reference.**

# PRINCETON SPORTS CAMPS PARKING MAP (WEST CAMPUS)

609.258.3369 • [www.princetonportscamps.com](http://www.princetonportscamps.com)



**DIRECTIONS** Recorded driving directions are available for callers with touchtone phones at 609.258.2222.

**PARKING** Please consult the Parking Lot Legend to determine available parking based on your check-in location. Individuals parking in areas other than designated check-in/check-out parking lots are subject to ticketing and/or towing at the owner's expense.

**Parking is not permitted along roadways. All vehicles must be parked with a lined space.**

**LATE ARRIVALS** Please check your camper information packet for specific information regarding late arrivals.