

Insurance Information

Participant's Name _____ Birth Date _____

University of Kentucky camp activities are covered by Allen Flood Company Insurance. This insurance plan is secondary to the participant's own primary plan. For detailed information regarding the policy coverage benefits and limits, please visit the UK Risk Management website at <http://www.uky.edu/VPAAdmin/Controller/riskhome/excess.html> or call 859.257.3708.

You MUST submit a copy of the front and back of all health insurance cards covering participant.

Check box and sign below if participant has NO health insurance coverage. **Disabilities accommodated with advanced (4-6 weeks) notification.**

Signature (Parent/Guardian if claimant is a minor under 18) _____ Date _____

Consent to Medical Treatment / Insurance Statement

It is understood that authority is given to the UK activity director or their designee to have my son/daughter treated for injuries or illness they incur during a UK camp, conference, or field trip activity.

In the event I cannot be contacted, I hereby give my permission for the UK activity director or their designee to seek advanced medical treatment for my son/daughter as deemed necessary by competent medical personnel.

I understand that the UK insurance coverage is on an "excess" basis only and I will be responsible for any expenses outside of the limits of UK's insurance.

Authorization to Release Information

I authorize any Health Care Provider, Insurance Company, Employer, Person or Organization to release any information regarding my medical treatment or benefits payable, including disability, to any Allen J. Flood Company, the Plan administrator, or authorized personnel for the purpose of validating and determining benefits payable. This data may be extracted for use in audit or statistical purposes. I understand that I or my authorized representative will receive a copy of this authorization upon request. This authorization or a Photostat copy of the original shall be valid for the duration of the claim.

PAYMENT AUTHORIZATION: I authorize all current and future medical benefits for services rendered and billed as a result of this claim to be made payable to the physicians and providers indicated on the invoices.

Signature (Parent/Guardian if claimant is a minor under 18) _____ Date _____

Emergency Contact Information

Name: _____ Relationship: _____

Phone number: _____
During Activity Dates

Medical Screen Form: (to be completed by a Physician) **OR** provide a copy of a physical exam signed by a physician indicating clearance to play.

Head	Yes	No	
ENT	Yes	No	
Neck, Back	Yes	No	
Heart	Yes	No	
Abdomen	Yes	No	
Genitalia	Yes	No	
Extremities	Yes	No	

Asthma	Yes	No	(circle one)
Currently Taking ANY			
Prescription Medication?	Yes	No	(circle one)
Please list:			
Date of Last Tetanus Shot or Booster:			
Known Allergies:			

Physician's Signature _____ Date _____

Physician's Telephone Number _____



Kentucky Soccer Winter Training Camp
 Business Office
 Joe Craft Center
 338 Lexington Avenue
 Lexington, KY 40506-0604

**University of Kentucky
Soccer**

**2012
Winter
Training Camp**



**Technical & Tactical Development
 Fitness Training / Games
 Specialized Goalkeeper Training
 Boys & Girls, ages 6-18
 8 Training Sessions
 Best opportunity to train before your season starts!**

**For questions please call
 Aaron at (859) 257-4971
 OR kentuckysoccercamp@uky.edu**

**Ages 6-11
 Sun: (Jan 8, 15, 22, 29) - 6:00-7:00pm
 Wednesday: (Jan 11, 18, 25, Feb 8) - 6:00-7:00pm**

**Ages 12-18
 Sun: (Jan 8, 15, 22, 29) - 7:00-8:00pm
 Wednesday: (Jan 11, 18, 25, Feb 8) - 7:00-8:00pm**

\$150 for 8 Training Sessions. Sign-up Now!!!

Non-Profit
 Organization
 US Postage PAID
 Permit 51
 Lexington, KY

Nutter Field House

All of our training sessions will take place in the Nutter Field House, UK's nationally renowned and state-of-the-art indoor training facility. The new \$450,000 surface is ideal for training.



Camp Sessions

2012 Winter Training Camp

Technical & Tactical Development

Fitness Training / Games

Specialized Goal Keeper Training

Boys and Girls, ages 6-18

8 Training Sessions

All training conducted by UK Women's Soccer Staff
(including GK training)

Spots will be filled on a first-come, first-served basis
Functional Training highlighting limited time and space

This is your best opportunity to train before your season starts!

Ages 6-11

Sun: (Jan 8, 15, 22, 29) - 6:00-7:00pm

Wednesday: (Jan 11, 18, 25, Feb 8) - 6:00-7:00pm

Ages 12-18

Sun: (Jan 8, 15, 22, 29) - 7:00-8:00pm

Wednesday: (Jan 11, 18, 25, Feb 8) - 7:00-8:00pm

How to Register

Our camps fill up quickly and are available on a first-come, first-served basis. Please complete application and remit as soon as possible. Registration may be completed by mail or online.

Mail: Complete the attached registration form, include check or money order for full amount (\$150) or non-refundable deposit (\$50) and mail to:

**2012 Kentucky Soccer Winter Training Camp
Business Office, Joe Craft Center
338 Lexington Avenue
Lexington, Kentucky 40506-0604**

Online: Register online at www.ukathletics.com/camps. Full payments or \$50 deposit, by credit card and electronic checks, are accepted for online registration.

In person: In the event that space is available, walk-up registrants will be accepted. A \$10 late fee will apply for walk-up registration. Cash or personal or cashiers/certified checks only.

Medical Information and Requirements

The University of Kentucky requires:

1. a signed Consent to Medical Treatment (see reverse side),
2. proof of a physical, dated within one year of camp. (The physical may be mailed separately from the application or presented to the camp trainer at check-in.). Physician's Statement is acceptable in lieu of a physical, and
3. A copy of the front and back of camper's health insurance card.

Confirmation

Campers will receive a confirmation email (if email address is provided) or letter upon receipt of application and deposit. Please allow 2 weeks for confirmation via regular mail.

Check-In Procedures

Check-in will be at Nutter Field House, located on the east side of UK's Commonwealth Stadium. Maps are available on the UK Athletic Department website: www.ukathletics.com.

Checklist of Things to Bring

Soccer ball, shin guards, soccer shoes and indoor or tennis shoes. All personal items should be labeled.

Athletic Trainer

A certified Athletic Trainer will be a permanent member of our camp staff. Training facilities are located inside Nutter Field House.

Disabilities accommodated with advanced (4-6 weeks) notification.

Registration

Fill out, detach, and mail with check (payable to UK Winter Soccer Camp) for total amount (\$150) or \$50 deposit to:

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Winter Training Camp
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Lexington, Kentucky 40506-0604**

**For questions please call
Aaron at (859) 257-4971
OR kentuckysoccercamp@uky.edu**

Please Enroll My

Son Daughter

(Please Print Clearly)

Child's Name

Parent's Name

Address

City

State

Zip

Age

Date of Birth

Home Phone

Cell Phone

Parent's Email for Confirmation

NCAA rules prohibit payment of camp expenses (camp tuition, transportation, spending money, etc.) for prospects (9th grade and above) by University of Kentucky boosters. NCAA rules also prohibit free or reduced camp admissions for prospects. If you have any questions, notify camp officials prior to attending camp.

The University of Kentucky's camps and clinics are open to any and all entrants (limited only by number, age, grade level and/or gender).