

# 2008 UCLA TRACK & FIELD CAMPS REGISTRATION FORM

Camper Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Email (required for confirmation): \_\_\_\_\_  
 Grade in School (Fall '08): \_\_\_\_\_ School: \_\_\_\_\_  
 Mother/Guardian: \_\_\_\_\_ Day Phone (cell/work): \_\_\_\_\_  
 Father/Guardian: \_\_\_\_\_ Day Phone (cell/work): \_\_\_\_\_  
 Roommate Preference (resident campers only): \_\_\_\_\_  
 How did you learn about this camp? \_\_\_\_\_

## MEDICAL INFORMATION

Emergency Contact (other than parent): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Allergies: \_\_\_\_\_  
 Current medications: \_\_\_\_\_ Date of last tetanus booster: \_\_\_\_\_  
 Pertinent Medical History: \_\_\_\_\_  
 Insurance Policy Holder's Name (required): \_\_\_\_\_  
 Insurance Co. (required): \_\_\_\_\_ Policy # (required): \_\_\_\_\_

## SESSIONS *(Sessions are coed except where noted)*

Enter amount:

### Day Camps (9:00am-3:00pm):

<input type="checkbox"/> Youth Camp #1: Track & Field (Ages 7-13): June 23-26 - \$300	<input type="checkbox"/> (optional) After-Care, 3:00-5:30pm	
<input type="checkbox"/> Youth Camp #2 Speed & Power (Ages 10-13): July 7-10 - \$300	<input type="checkbox"/> After-Care \$100	\$ _____
<input type="checkbox"/> Hurdles Camp (Boys, ages 14-18): July 12-13 - \$150	<input type="checkbox"/> After-Care \$100	\$ _____
<input type="checkbox"/> Speed & Power Camp (Boys, ages 14-18): July 14-17- \$300	<i>(After-Care n/a for this session)</i>	\$ _____
	<input type="checkbox"/> After-Care \$100	\$ _____

### Overnight Camps:

<input type="checkbox"/> Pole Vault Camps (Ages 12-18)		
<input type="checkbox"/> Session #1: June 23-26	<input type="checkbox"/> Session #2: July 7-10	<input type="checkbox"/> Session #3: July 21-24
<input type="checkbox"/> Resident - \$550	<input type="checkbox"/> Commuter - \$450	\$ _____
<input type="checkbox"/> Throwing Camp (Ages 14-18): July 8-12		
<input type="checkbox"/> Resident - \$500	<input type="checkbox"/> Commuter - \$425	\$ _____
<input type="checkbox"/> Sprints and Hurdles (Girls only, ages 9-18): July 13-16		
<input type="checkbox"/> Resident - \$500	<input type="checkbox"/> Commuter - \$350	\$ _____
<input type="checkbox"/> Jumps Camps (Ages 14-18):		
<input type="checkbox"/> High Jump: July 14-17	<input type="checkbox"/> Long and Triple Jump: July 21-24	
<input type="checkbox"/> Resident - \$495	<input type="checkbox"/> Commuter - \$425	\$ _____
<input type="checkbox"/> Speed & Explosion Camp (Ages 14-18): July 28-31		
<input type="checkbox"/> Resident - \$495	<input type="checkbox"/> Commuter - \$425	\$ _____
<input type="checkbox"/> Cross Country Camp (Ages 14-18): August 5-8		
<input type="checkbox"/> Resident - \$550	<input type="checkbox"/> Commuter - \$450	\$ _____
<input type="checkbox"/> UCLA Alumni Association or Faculty/Staff Discount - less \$25 per session (MUST include copy of card to receive discount)		-\$ _____

**TOTAL DUE:**

\$ \_\_\_\_\_

## PAYMENT

- Full payment  
 Deposit only (\$150 per session - balance due by June 2)  
*Please review our cancellation policy at [www.uclasportscamps.com](http://www.uclasportscamps.com)*

- CHECK - Payable to UC Regents (please include camper's name on check)  
 CREDIT CARD - if paying deposit only, the balance will be charged on June 2  
 Please charge my:  Visa  Mastercard  Discover (sorry, no American Express)

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_  
 Cardholder's Name (print): \_\_\_\_\_  
 Cardholder's Signature: \_\_\_\_\_

Register online at [www.uclasportscamps.com](http://www.uclasportscamps.com)

By fax: (310) 206-7527  
 By mail: UCLA Sports Camps  
 P.O. Box 24044  
 Los Angeles, CA 90024-0044

Questions? Call (310) 206-3550 or email [camps@athletics.ucla.edu](mailto:camps@athletics.ucla.edu)