

## 2012 CAMP APPLICATION FORM

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_  
Emergency Contact Phone: \_\_\_\_\_  
Grade (rising): \_\_\_\_\_  
School: \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*\*Registration forms must be received no later than 2 WEEKS prior to the first day of the desired camp. (Cancellation fees apply)**

Faculty/Staff Discount   
Department \_\_\_\_\_  
(Vanderbilt faculty/staff receive 15% discount)

### For Office Use Only:

Amount Paid: \_\_\_\_\_  
Amount Due: \_\_\_\_\_

### CAMP(S) ATTENDING:

#### Elite Camp – June 15-16

(Rising 8<sup>th</sup> – 12<sup>th</sup> including seniors)

Overnight (\$150)   
Commuter (\$125)

(Roommate \_\_\_\_\_)

#### Individual Skills Camp – July 16-19

(K – Rising 8<sup>th</sup>) \$250

**Mail completed application with payment to:  
Vanderbilt University Athletics Department  
Dept. AT 40459, Atlanta, GA 31192-0459  
Make checks payable to "Vanderbilt University"  
Write "Girls Basketball Camp" in Memo Line  
(please note the our bank is located in Atlanta)  
QUESTIONS?? CALL 615/343-8482**

**YOU CAN REGISTER ON-LINE AT OUR CAMP WEBSITE AT  
[www.vucommodores.com/womenhoop](http://www.vucommodores.com/womenhoop)**

**Every camper will be required to have a signed liability waiver on file prior to starting camp**

The undersigned athletic camp participant ("participant") (or parent / guardian if participant is under 18 years of age) understands that the participant will be engaging in physical activity during the program, which contains an inherent risk of physical injury (which could include a serious injury or death) and the undersigned (for himself/herself in the case participant is an adult or for participant if participant is a minor) assumes the risk and does release, waive and hold harmless Vanderbilt University, its officers, trustees, agents and employees, including specifically all persons employed or hired by Vanderbilt to conduct the camp for which this informed consent/participant release applies, from any and all liability or cause of action for personal injury or property damage arising out of the participant's participation in the camp program. In the case of a minor participant, I hereby grant permission for the participant to attend the camp and consent to the participant being treated by a licensed physician or health care professional or a member of the Vanderbilt athletic training staff in the event of an injury, illness, or other mishap. I understand and agree that Vanderbilt does not provide any health or liability insurance coverage for participant and that the undersigned will be financially responsible for any costs of expenses incurred related to the provision of any medical treatment to participant. In the event camp activity includes transporting a minor participant in a vehicle, I grant permission for the transporting of the minor participant to and from said camp activity. Any action arising out of participant's participation in the camp and the terms of this release shall be governed by the laws of the State of Tennessee and any related action shall be brought only in Nashville, Davidson County, Tennessee."

\_\_\_\_\_  
Signature (Parent/legal guardian if camper is under 18)

\_\_\_\_\_  
Date

**NOTE: Medical Information Form must be retrieved from our website at [www.vucommodores.com/womenhoop](http://www.vucommodores.com/womenhoop). All campers must have this in order to participate in camp.**