Thank you for selecting The Ohio State University Women’s Gymnastics Winter Clinic. We are confident that you will both enjoy and benefit from the instruction you will receive at our camp.

A copy of our “Camper Rules and Expectations” has been included in this packet. Parents should review these rules with their camper before coming to camp.

Included at the end of this packet are the Parent Consent, Waiver and Release Form and the Ohio Department of Health Concussion Information Sheet.

PLEASE COMPLETE THESE FORMS AND BRING WITH YOU TO THE EVENT’S CHECK-IN. DO NOT MAIL THESE FORMS TO US PRIOR TO THE EVENT

EACH FORM IS REQUIRED IN ORDER TO PARTICIPATE IN THE EVENT. CAMPERS WHO DO NOT SUBMIT BOTH THE PARENT CONSENT AND CONCUSSION INFORMATION FORM WILL NOT BE PERMITTED TO PARTICIPATE UNTIL WE HAVE RECEIVED THEM.

INFORMATION FOR ALL CAMPERS

Parent Consent, Waiver and Release Form: The Consent Form should be fully completed and signed by the player’s parent or guardian. The parent or guardian should disclose the player’s pertinent medical history, including but not limited to, any medications which the player is currently taking or required to take. Please note that when you disclose pertinent medical history, you may be requested to provide additional information (e.g., documentation from the player’s treating physician) for our event medical staff to review prior the player being permitted to participate in the event. If you have questions, please contact Cassie Bernard (Asst. Director - Buckeye Sports Camps Office) by email at bernard.109@osu.edu. In order to adequately assess your information, please contact us at least 14 days prior to the start of the event.

Ohio Department of Health Concussion Information Sheet: The purpose of the concussion information sheet is to provide information to the parent or guardian and player in recognizing the signs and symptoms of a concussion. Under Ohio’s “Return to Play” Law, the Concussion Information Form should be fully completed and signed by the player’s parent or guardian. If you have questions, please contact Cassie Bernard (Asst. Director - Buckeye Sports Camps Office) by email at bernard.109@osu.edu.

EACH FORM IS REQUIRED IN ORDER TO PARTICIPATE IN THE CAMP. CAMPERS WHO DO NOT SUBMIT BOTH COMPLETED FORMS WILL NOT BE PERMITTED TO PARTICIPATE. NO EXCEPTIONS WILL BE MADE.
**Medications:** Medications are generally not permitted at camp. Players may only carry medications to the event if such medications are intended to treat a potentially life-threatening condition.

With prior written approval from the Camps Office, a player may carry an EPI-pen and/or an inhaler for asthma. In order to bring an EPI-pen, asthma inhaler or any other medication to the event, a parent or guardian must make a written request for approval to the Camps Office.

An EPI-pen, asthma inhaler and any other approved medications must be in the original prescription container with the child’s name clearly marked. Children are required to self-administer medications whenever possible. Camp staff members, however, are able to administer these medications in an emergency.

To make a written request to bring medication to camp, please contact Cassie Bernard (Asst. Director – Buckeye Sports Camps Office) by email at bernard.109@osu.edu. In order to adequately assess your information, please contact us at least 14 days prior to the start of the event.

We also want to share that there has been a mumps outbreak here at Ohio State. We encourage parents to follow up with your child’s physician to ensure that their MMR immunization status is up to date. Here is the link for more information https://www.osu.edu/mumpsinfo.

**Accommodations:** If you have questions about accessibility or you need to request assistance to participate in any of the Ohio State Athletics Department’s sports camps, including accommodations for dietary restrictions, please contact Cassie Bernard (Assistant Director - Buckeye Sports Camps Office) by email at bernard.109@osu.edu. In order to adequately assess your request, please contact us at least 14 days prior to the start of the camp.

**General Parking Instructions at Ohio State:** The use of University parking lots requires a permit at all times. Unless instructed otherwise, you should plan to purchase a temporary parking permit when you park on campus, including when using the parking lots near our camp athletic fields. When parking, please make sure your vehicle is in a legal, marked space.

Hourly and short-term permits also may be purchased using the self-service Pay-n-Display machines located in these lots. Please note that these machines only accept coins or credit cards (no paper bills). When you purchase a temporary permit from a Pay-n-Display machine you may park in “A”, “B”, or “C” parking space (see signs in the lot) in the parking lot where the Pay-N-Display pay machine is located.

For more details on the use and location Pay-n-Display machines, visit: http://www.campusparc.com/osu/visitors-patients.

**Campus Construction:** Campus construction is occurring in phases and will be changing through the summer. For the latest information, visit http://go43210.osu.edu/. For the campus construction map, visit http://www.osu.edu/map/construction/.
Refunds: A refund less a $15 administrative fee will be issued for any cancellation received by at least 2 weeks prior to the start of the clinic. The administrative fee and the 2.5% online processing fee are not refundable for ANY reason.

Because we have to guarantee our number of campers in order to prepare for camp, any cancellation received less than 2 weeks prior to the start of camp will not be eligible for any refund except in the case of injury, illness, or mandatory school event, in which case supporting documentation from a doctor or school is required.

A camp fee may not be transferred to any other Ohio State sports camp. A camp fee may not be transferred to any other camper. All cancellation notices must be received by the deadline above and submitted by mail, email, or fax - no phone calls or voicemails. All supporting documentation required for a refund to be approved and processed must be submitted within 10 days after the conclusion of the camp session. Refund requests must be submitted on the Refund Request Form available at OhioStateBuckeyes.com/camps. Campers who are injured while at camp but remain at camp will not be eligible for any refund.

Questions: If you have any questions, please contact:

Buckeye Sports Camps Office
BuckeyeCamps@osu.edu
614-247-CAMP
9am-5pm Weekdays
Winter Clinic
December 7, 2014
Grades 2-12
9:00am – 4:00pm

Camp Schedule: Check-in will be take place from 9:00am – 10:00am on December 7th. All campers will check-in at Steelwood Athletic Training Facility (see enclosed map, letter O).

Steelwood Athletic Training Facility
1160 Steelwood Road
Columbus, Ohio 43210

Parking instructions for camp: Campers, coaches, and parents should park in the Steelwood Lot (see map, number 2). Parking will be FREE in this lot. When parking, please make sure your vehicle is in a legal, marked space. Parking fines are the responsibility of the vehicle owner. If Steelwood Lot is full, please park in the Ultimate Sports Lot, located behind Steelwood. Parking is also free in this lot.

DO NOT PARK IN THE ROUGE PARKING LOT LOCATED IN FRONT OF STEELWOOD. ANY CARS PARKED IN THE ROUGE PARKING LOT MAY BE TOWED.

What to Bring: Campers should bring their regular workout gear. No equipment will be provided to any camper for any reason.

Meals: No meals will be provided; campers should bring a packed lunch. Water will be available at all camp sessions.

Spectators: Due to limited amount of space at the Steelwood Athletic Training Center, spectators may only be permitted to watch during Open Workouts from 3:30pm – 4:00pm. Parents should closely supervise any children who accompany them to watch the event. All spectators and participants (unless instructed to do so) should refrain from using, moving or otherwise handling any Ohio State sports equipment that is located in the training facility.
**PARENT CONSENT, WAIVER AND RELEASE**

In consideration of the Ohio State University Buckeye Sports Camp acceptance of [insert camper's name on blank line] as a participant in the sports camp for the period in the dates indicated above, and in return for the opportunity to participate in this camp:

It is agreed that all risks attendant to watching and/or participating in camp activities, including, but not limited to bodily injury, are assumed by the participant and his/her parents and/or legal guardian and that this assumption is acknowledged, approved, and agreed to by said participant and his/her parents and/or legal guardian as indicated by the signature hereto. Buckeye Sports Camps will be financially responsible for and has insurance that will cover most injuries/accidents occurring during camp (subject to policy terms, conditions and limits) but only as secondary coverage after parent’s/guardian's insurance has paid.

I hereby certify that the above named participant is physically able to participate in The Ohio State University Buckeye Sports Camp and that I know of no physical impairments which would in any manner limit his/her participation in such a program. I hereby grant permission for physicians, dentists, other licensed health care providers and their designees employed or directed by The Ohio State University to administer outpatient medical, surgical, or dental services as appropriate or necessary antigens or other injections, to perform emergency procedures as necessary or to refer to other duly licensed medical personnel when necessary.

In consideration for honoring the participant’s request to participate in the above activity, I, for myself, my executors, administrators, and assigns, do hereby release and forever discharge The Ohio State University, and its Board of Trustees, its respective entities, administrators, faculty members, employees, agents, and students from any claims that I might have myself or could bring on the participants behalf with regard to damages, demands, or any actions whatsoever, including those based on negligence or failure to supervise, in any manner arising out of the participant's participation in this activity. I also hereby agree to save, hold harmless, and indemnify The Ohio State University, its Board of Trustees, and/or its respective entities, administrators, faculty members, employees, agents, and students against any and all claims, including claims of negligence or failure to supervise, which the participant might bring against them as a result of his or her participation in the above activity. I recognize that this Release means that I am giving up, among other things, rights to sue the University or its Board of Trustees, its respective entities, administrators, faculty members, employees, agents or students for injuries, damages or losses that my child may incur.

**MEDICAL INSURANCE INFORMATION:**

<table>
<thead>
<tr>
<th>COMPANY NAME:</th>
<th>PHONE#:</th>
<th>GROUP#:</th>
<th>ID#:</th>
</tr>
</thead>
</table>

**MEDICAL HISTORY, IF PERTINENT (INCLUDING, BUT NOT LIMITED TO, INJURIES, SURGERIES, ALLERGIES)**

1 Write “NONE” if Not applicable:

**MEDICATIONS**

1 Write “NONE” if Not applicable:

**OTHER SPECIAL CONSIDERATIONS (E.G., DIETARY NEEDS) OR ACCOMMODATIONS**

1 Write “NONE” if Not applicable:

**PARENT OR LEGAL GUARDIAN’S SIGNATURE:**

**EMERGENCY CONTACT INFORMATION**

<table>
<thead>
<tr>
<th>PARENT/ GUARDIAN NAME:</th>
<th>PHONE#:</th>
</tr>
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</table>

**DATE:**

1 Please note: Our camp medical staff may request additional information (e.g., documentation from the camper’s treating physician) to review prior the camper being permitted to participate in camp. If you have questions prior to camp, contact Cassie Bernard, Asst. Director of Camps, at bernard.109@osu.edu.
Dear Parent/Guardian and Athletes,

This information sheet is provided to assist you and your child in recognizing the signs and symptoms of a concussion. Every athlete is different and responds to a brain injury differently, so seek medical attention if you suspect your child has a concussion. Once a concussion occurs, it is very important your athlete return to normal activities slowly, so he/she does not do more damage to his/her brain.

What is a Concussion?
A concussion is an injury to the brain that may be caused by a blow, bump, or jolt to the head. Concussions may also happen after a fall or hit that jars the brain. A blow elsewhere on the body can cause a concussion even if an athlete does not hit his/her head directly. Concussions can range from mild to severe, and athletes can get a concussion even if they are wearing a helmet.

Signs and Symptoms of a Concussion
Athletes do not have to be “knocked out” to have a concussion. In fact, less than 1 out of 10 concussions result in loss of consciousness. Concussion symptoms can develop right away or up to 48 hours after the injury. Ignoring any signs or symptoms of a concussion puts your child’s health at risk!

Signs Observed by Parents of Guardians
♦ Appears dazed or stunned.
♦ Is confused about assignment or position.
♦ Forgets plays.
♦ Is unsure of game, score or opponent.
♦ Moves clumsily.
♦ Answers questions slowly.
♦ Loses consciousness (even briefly).
♦ Shows behavior or personality changes (irritability, sadness, nervousness, feeling more emotional).
♦ Can’t recall events before or after hit or fall.

Symptoms Reported by Athlete
♦ Any headache or “pressure” in head. (How badly it hurts does not matter.)
♦ Nausea or vomiting.
♦ Balance problems or dizziness.
♦ Double or blurry vision.
♦ Sensitivity to light and/or noise
♦ Feeling sluggish, hazy, foggy or groggy.
♦ Concentration or memory problems.
♦ Confusion.
♦ Does not “feel right.”
♦ Trouble falling asleep.
♦ Sleeping more or less than usual.

Be Honest
Encourage your athlete to be honest with you, his/her coach and your health care provider about his/her symptoms. Many young athletes get caught up in the moment and/or feel pressured to return to sports before they are ready. It is better to miss one game than the entire season… or risk permanent damage!

Seek Medical Attention Right Away
Seeking medical attention is an important first step if you suspect or are told your child has a concussion. A qualified health care professional will be able to determine how serious the concussion is and when it is safe for your child to return to sports and other daily activities.
♦ No athlete should return to activity on the same day he/she gets a concussion.
♦ Athletes should NEVER return to practices/games if they still have ANY symptoms.
♦ Parents and coaches should never pressure any athlete to return to play.

The Dangers of Returning Too Soon
Returning to play too early may cause Second Impact Syndrome (SIS) or Post-Concussion Syndrome (PCS). SIS occurs when a second blow to the head happens before an athlete has completely recovered from a concussion. This second impact causes the brain to swell, possibly resulting in brain damage, paralysis, and even death. PCS can occur after a second impact. PCS can result in permanent, long-term concussion symptoms. The risk of SIS and PCS is the reason why no athlete should be allowed to participate in any physical activity before they are cleared by a qualified health care professional.

Recovery
A concussion can affect school, work, and sports. Along with coaches and teachers, the school nurse, athletic trainer, employer, and other school administrators should be aware of the athlete’s injury and their roles in helping the child recover.

During the recovery time after a concussion, physical and mental rest are required. A concussion upsets the way the brain normally works and causes it to work longer and harder to complete even simple tasks. Activities that require concentration and focus may make symptoms worse and cause the brain to heal slower. Studies show that children’s brains take several weeks to heal following a concussion.

www.healthyohioprogram.org/concussion

Rev. 02.13
Returning to Daily Activities

1. Be sure your child gets plenty of rest and enough sleep at night – no late nights. Keep the same bedtime weekdays and weekends.
2. Encourage daytime naps or rest breaks when your child feels tired or worn-out.
3. Limit your child’s activities that require a lot of thinking or concentration (including social activities, homework, video games, texting, computer, driving, job-related activities, movies, parties). These activities can slow the brain’s recovery.
4. Limit your child’s physical activity, especially those activities where another injury or blow to the head may occur.
5. Have your qualified health care professional check your child’s symptoms at different times to help guide recovery.

Returning to School

1. Your athlete may need to initially return to school on a limited basis, for example for only half-days, at first. This should be done under the supervision of a qualified health care professional.
2. Inform teacher(s), school counselor or administrator(s) about the injury and symptoms. School personnel should be instructed to watch for:
   a. Increased problems paying attention.
   b. Increased problems remembering or learning new information.
   c. Longer time needed to complete tasks or assignments.
   d. Greater irritability and decreased ability to cope with stress.
   e. Symptoms worsen (headache, tiredness) when doing schoolwork.
3. Be sure your child takes multiple breaks during study time and watch for worsening of symptoms.
4. If your child is still having concussion symptoms, he/she may need extra help with school-related activities. As the symptoms decrease during recovery, the extra help or supports can be removed gradually.

Returning to Play

1. Returning to play is specific for each person, depending on the sport. Starting 4/26/13, Ohio law requires written permission from a health care provider before an athlete can return to play. Follow instructions and guidance provided by a health care professional. It is important that you, your child and your child’s coach follow these instructions carefully.
2. Your child should NEVER return to play if he/she still has ANY symptoms. (Be sure that your child does not have any symptoms at rest and while doing any physical activity and/or activities that require a lot of thinking or concentration).
3. Be sure that the athletic trainer, coach and physical education teacher are aware of your child’s injury and symptoms.
4. Your athlete should complete a step-by-step exercise-based progression, under the direction of a qualified healthcare professional.
5. A sample activity progression is listed below. Generally, each step should take no less than 24 hours so that your child’s full recovery would take about one week once they have no symptoms at rest and with moderate exercise.*

Sample Activity Progression*

**Step 1:** Low levels of non-contact physical activity, provided NO SYMPTOMS return during or after activity.
(Examples: walking, light jogging, and easy stationary biking for 20-30 minutes).

**Step 2:** Moderate, non-contact physical activity, provided NO SYMPTOMS return during or after activity.
(Examples: moderate jogging, brief sprint running, moderate stationary biking, light calisthenics, and sport-specific drills without contact or collisions for 30-45 minutes).

**Step 3:** Heavy, non-contact physical activity, provided NO SYMPTOMS return during or after activity.
(Examples: extensive sprint running, high intensity stationary biking, resistance exercise with machines and free weights, more intense non-contact sports specific drills, agility training and jumping drills for 45-60 minutes).

**Step 4:** Full contact in controlled practice or scrimmage.

**Step 5:** Full contact in game play.

*If any symptoms occur, the athlete should drop back to the previous step and try to progress again after a 24 hour rest period.

Resources

ODH Violence and Injury Prevention Program
www.healthyohioprogram.org/vipp/injury.aspx

Centers for Disease Control and Prevention
www.cdc.gov/Concussion

National Federation of State High School Associations
www.nfhs.org

Brain Injury Association of America
www.biausa.org/
Acknowledgement of Having Received the “Ohio Department of Health’s Concussion and Head Injury Information Sheet”

By signing this form, as the parent/guardian/care-giver of the student-athlete named below, I acknowledge receiving a copy of the concussion and head injury information sheet prepared by the Ohio Department of Health as required by section 3313.539 of the Revised Code.

I understand concussions and other head injuries have serious and possibly long-lasting effects.

By reading the information sheet, I understand I have a responsibility to report any signs or symptoms of a concussion or head injury to coaches, administrators and my student-athlete’s doctor.

I also understand that coaches, referees and other officials have a responsibility to protect the health of the student-athletes and may prohibit my student-athlete from further participation in athletic programs until my student-athlete has been cleared to return by a physician or other appropriate health care professional.

_________________________  ___________________________
Athlete (Please Print)        Date

_________________________  ___________________________
Parent/Guardian              Date
RULES AND EXPECTATIONS FOR DAY CAMPERS

The safety of our campers is our primary concern. Campers’ adherence to these rules and expectations is critical to making our camps safe, rewarding and fun for all participants.

Expectations for camper behavior:
- Follow all instructions of camp staff and immediately consult the head coach or camp director if you are uncertain about these instructions.
- Label all personal belongings, especially equipment. Buckeye Sports Camps is not responsible for campers’ lost or stolen items.
- Notify a camp counselor as soon as any problem arises, big or small.

Behaviors not permitted:
- Using profanity or inappropriate language, whether it is written or verbal.
- Leaving the camp area as designated by the camp director. The Ohio State University is a large campus in a major metropolitan area, so campers are not permitted to walk freely around the campus or surrounding areas.
- Inappropriate use of a cell phone or cell phone camera during camp – phone may be confiscated for the duration of camp.
- Damaging or stealing University or other people's property. Camp fees do not cover payment for any lost or stolen items.

While unacceptable conduct is not anticipated from campers, if Ohio State has reason to believe a violation of any camp rule or expectation has occurred, this could result in disciplinary action, up to and including dismissal from camp. Refunds will not be issued to campers dismissed from camp for disciplinary reasons.

We expect that parents or guardians of campers will be available (by phone) during the duration of the camp in the event the camp director or other camp staff needs to speak with them about a camper’s behavior.

Campers and parents should review this important information prior to arriving at camp.

Questions may be directed to the Buckeye Sports Camps Office at (614) 247-CAMP.