



University Recreation

Tiger's Den: Winter Break Camp 2018

To ensure registration, please fill out all forms completely. Submit completed forms to UREC Operations Desk or Camp Director.
All payments are due at the time of registration.

CAMPER INFORMATION:

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: mm/dd/yyyy _____ GENDER: (circle) Male Female

About the Program:

Winter Break camp will follow the same model as our Tiger's Den Summer programs. Campers will participate in traditional summer camp games, swim in our indoor pool, play in multiple sports activities, climb in our indoor climbing gym, and more! Lunch and an afternoon snack are provided daily.

Time of Program:

Campers can be dropped off starting at 8:00am (Those that add early drop off can be dropped off as early as 7:30am).

Campers must be picked up by 5:00pm (Those that add late pickup can pickup as late as 5:30pm).

Campers can be picked up at anytime throughout the day.

What to Bring:

Make sure your camper is wearing comfortable but activewear style clothing.

Closed toed shoes are mandatory.

Backpack containing swimsuit, towel, and a full change of dry clothing.

REGISTRATION:

Place a CHECK MARK next to selected sessions

WINTER BREAK SESSION 1- (12/19-12/21) _____ LSU Affiliate Rate: \$100 _____ Community Rate: \$120

WINTER BREAK SESSION 2 - (1/2-1/4) _____ LSU Affiliate Rate: \$100 _____ Community Rate: \$120

FOR STAFF USE ONLY

METHOD OF PAYMENT: (Circle One) CASH CARD PAYROLL DEDUCT CHECK (Check Number _____)

PROCESSED BY: _____ DATE: _____ / _____ / _____



University Recreation

PARENT INFORMATION:

1.) Parent / Guardian Name: _____
 Parent / Guardian Address: _____

Phone Number: _____
 Email Address: _____

2.) Parent / Guardian Name: _____
 Parent / Guardian Address: _____

Phone Number: _____
 Email Address: _____

EMERGENCY CONTACT INFORMATION: (cannot be parent)

1.) Contact Name: _____
 Relation to Camper: _____

Phone Number: _____

2.) Contact Name: _____
 Relation to Camper: _____

Phone Number: _____

AUTHORIZED PICKUP INFORMATION

Tiger's Den reserves the right to ask for photo identification upon pickup. Only those persons listed will be allowed to pickup camper.

Please Check One:

YES, All of the individuals listed above are authorized to sign my child out of camp. List any additional people here:

1) _____
 3) _____

2) _____
 4) _____

NO, Only the following individuals listed here are authorized to sign my child out of camp.

1) _____
 3) _____

2) _____
 4) _____



University Recreation

Tiger's Den: Winter Break - Medical Information

This required information assists us in the guidance of care. In the event of an emergency, this form will be provided to the appropriate emergency personnel. Any changes to any of these responses should be communicated as quickly as possible.

Camper Information:

FIRST NAME: _____ LAST NAME: _____ AGE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DATE OF BIRTH: _____

Insurance Information:

IS THE PARTICIPANT COVERED BY MEDICAL INSURANCE? YES NO

IF SO, LIST CARRIER NAME: _____ GROUP # or POLICY #: _____

NAME OF POLICY HOLDER: _____ RELATIONSHIP TO PARTICIPANT: _____

NAME OF FAMILY PHYSICIAN: _____ PHONE NUMBER: _____

PHYSICIAN ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

Allergies:

Please list any MEDICATION allergies here Please list any FOOD allergies here DOES YOUR CHILD REQUIRE ADMINISTRATION OF ANY PRESCRIBED MEDICATION IN THE EVENT OF AN ALLERGIC REACTION OR OTHER MEDICAL EMERGENCY?

1: _____ 1: _____ NO

2: _____ 2: _____ YES - Fill out Medical Authorization Form.

3: _____ 3: _____

4: _____ 4: _____

Medication:

PLEASE LIST ANY MEDICATION (PRESCRIPTION OR OVER THE COUNTER) THAT YOUR CHILD TAKES ON A DAILY BASIS:

Name of Medication:	Dosage Amount:	Time of Day Taken:	OR <input type="checkbox"/>	CHECK THIS BOX IF YOUR CHILD TAKES NO MEDICATION ON A DAILY BASIS
1: _____	1: _____	1: _____		
2: _____	2: _____	2: _____		

No medication will be administered or maintained by University Recreation staff without a signed Medical Authorization Form. It is your responsibility to list the above information fully and to inform University Recreation staff of any changes that may occur.

Immunization:

IS YOUR CHILD IMMUNIZED ACCORDING TO THE DEPARTMENT OF HEALTH AND HOSPITALS GUIDELINES FOR YOUR CHILDS AGE? YES NO

All Tiger's Den Participants must be immunized according to the guidelines set by the Department of Health and Hospitals

Permission to Provide Necessary Treatment & Emergency Care:

In the event of a medical emergency requiring more than basic first aid, I understand that all attempts to contact me will be made. I also understand that in order to obtain the quickest medical treatment for my child, LSU University Recreation will activate EMS and, if necessary, transport my child to the nearest medical emergency facility.

This emergency medical plan is correct and completed as far as I know, and the person herein described has permission to engage in all camp activities except as noted.

PRINT NAME OF PARENT/LEGAL GUARDIAN: _____ DATE: _____

SIGN NAME OF PARENT/LEGAL GUARDIAN: _____

IF YOUR CHILD DOES NOT REQUIRE ANY MEDICINE, LEAVE THIS FORM BLANK.



UREC Tiger's Den - Medical Authorization Form

Medicine **MUST** be in its original container.

CHILD'S NAME: _____

MEDICATION NAME: _____

CIRCUMSTANCE IN WHICH MEDICATION WOULD NEED TO BE ADMINISTERED:

DOSAGE AMOUNT: _____

WHAT SYMPTOMS / ANTICIPATED REACTION THAT WOULD REQUIRE ADMINISTRATION OF THIS MEDICATION?

SPECIAL INSTRUCTIONS FOR ADMINISTERING "AS NEEDED" MEDICATION:

Dear Parents/Guardians:

You have identified that your child may require specific prescribed medication in the event of an emergency medical situation. By signing this form you authorize LSU University Recreation to administer the medication as indicated above.

CHILD'S NAME

MEDICATION NAME

PARENT/LEGAL GUARDIAN NAME

PARENT/LEGAL GUARDIAN SIGNATURE

DATE

Administration Documentation:

Phone Contact Time & Date	Date Given	Time Given	Dosage	Staff Signature
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



2018 UREC Tiger's Den Winter Break Camp - Participation Agreement

I understand and agree that there is a risk of serious injury to me while utilizing University Recreation facilities, equipment, and programs and recognize every activity has a certain degree of risk, some more than others. By participating, I knowingly and voluntarily assume any and all risk of injuries, regardless of severity, which from time to time may occur as a result of my participation in athletic and other activities through LSU University Recreation.

I hereby certify I have adequate health insurance to cover any injury or damages that I may suffer while participating, or alternatively, agree to bear all costs associated with any such injury or damages myself.

I further certify that I am in good health and have no mental or physical condition or symptoms that could interfere with my safety or the safety of others while participating in any activity using any equipment or facilities of LSU University Recreation. I understand and agree that I alone am responsible to determine whether I am physically and mentally fit to participate, perform, or utilize the activities, programs, equipment or facilities available at Louisiana State University, and that I am not relying on any advice from LSU University Recreation in this regard. To the extent I have any questions or need any information about my physical or mental condition or limitations, I agree to seek professional advice from a qualified physician.

Further, I hereby RELEASE AND HOLD HARMLESS, the State of Louisiana, the Board of Supervisors of Louisiana State University and Agricultural & Mechanical College, and its respective members, officers, employees, student workers, student interns, volunteers, agents, representatives, institutions, and/or departments from any and all liability, claims, damages, costs, expenses, personal injuries, illnesses, death or loss of personal property resulting, in whole or in part, from my participation in, or use of, any facility, equipment, and/or programs of Louisiana State University. In case of an emergency, this consent also authorizes the release of this form and all medical and accident report forms to emergency personal, doctors, hospitals, insurance companies, my employers, other person or entities deemed

LEGAL NAME OF CHILD PARTICIPATING IN UREC TIGER'S DEN

PRINT NAME OF PARENT/LEGAL GUARDIAN

PHONE NUMBER

SIGNATURE OF PARENT/LEGAL GUARDIAN

DATE



2018 UREC Tiger's Den Winter Break Camp - Minor Photo Release

By indicating "I Agree" in the checkbox below, I consent for the camper named below to be the subject of any photography, audio, or video recordings, which may take place while you are participating in programming and/or open recreation activities. Such photography and recordings may be used for LSU publications, webcasts, telecasts, advertising, and for any other additional promotional or marketing purpose as Louisiana State University may see fit.

You hereby waive all rights or claims you may have to any financial compensation or payment of royalties in connection with any publications, webcasts, broadcasts, or exhibition of these materials. When/if the individual's likeness or image is used in a publication, there will be no identifying information provided.

I agree to the above statements.

Please do not include in photographs and recordings.

CAMPER'S NAME

PRINT NAME OF PARENT/LEGAL GUARDIAN

PHONE NUMBER

SIGNATURE OF PARENT/LEGAL GUARDIAN

DATE



2018 UREC Tiger's Den Winter Break Camp - Rock Climbing Participant Agreement

I understand and agree that there is a risk of serious injury to me while utilizing University Recreation facilities, equipment, and programs and recognize every activity has a certain degree of risk, some more than others. By participating, I knowingly and voluntarily assume any and all risk of injuries, regardless of severity, which from time to time may occur as a result of my participation in athletic and other activities through LSU University Recreation.

I hereby certify I have adequate health insurance to cover any injury or damages that I may suffer while participating, or alternatively, agree to bear all costs associated with any such injury or damage myself.

I further certify that I am in good health and have no mental or physical condition or symptoms that could interfere with my safety or the safety of others while participating in any activity using any equipment or facilities of LSU University Recreation. I understand and agree that I alone am responsible to determine whether I am physically and mentally fit to participate, perform, or utilize the activities, programs, equipment or facilities available at Louisiana State University, and that I am not relying on any advice from LSU University Recreation in this regard. To the extent I have any questions or need any information about my physical or mental condition or limitations, I agree to seek professional advice from a qualified physician.

Further, I hereby RELEASE AND HOLD HARMLESS, the State of Louisiana, the Board of Supervisors of Louisiana State University and Agricultural & Mechanical College, and its respective members, officers, employees, student workers, student interns, volunteers, agents, representatives, institutions, and/or departments from any and all liability, claims, damages, costs, expenses, personal injuries, illnesses, death or loss of personal property resulting, in whole or in part, from my participation in, or use of, any facility, equipment, and/or programs of Louisiana State University.

I will wear proper protective equipment and I agree to abide by all rules of the sport as mandated by LSU University Recreation.

I, the undersigned, am at least eighteen (18) years of age or have a parent/legal guardian's signature, will not use an auto-belay system if weighing less than 90 pounds, am physically fit, have read this participation agreement, and understand its terms and conditions. I agree not to climb onto the top of the structure and stay directly under the rope or belay system I am using. Any certifications, including belay certifications, are good only at the LSU's Baton Rouge campus, Student Recreation Center, and are not transferable to any other person.

Any questions concerning equipment to be used should be directed to Climbing Wall Staff prior to engaging in this activity. The wall is not designed for rappelling from the top of the tower. Doing so may result in serious physical injury to the participant and/or bystanders.

CAMPER'S NAME

WEIGHT OF CAMPER

PRINT NAME OF PARENT/LEGAL GUARDIAN

PHONE NUMBER

SIGNATURE OF PARENT/LEGAL GUARDIAN

DATE



2018 UREC Tiger’s Den Winter Break Camp – Aquatics Acknowledgment

My child is permitted to participate in Aquatic activities YES NO

My child is a proficient swimmer YES NO

Please indicate on the lines below your child’s swimming ability and comfort in an aquatics environment. Include specific details of swim lessons completed or any other noteworthy aquatics experience.

All campers must pass a swim test, which constitutes of a 25 yard continuous swim on the surface of the water without the aid of any flotation devices, under the supervision of lifeguards, counselors, and aquatics staff. The final decision on whether a camper has passed the swim test will be determined by the supervising lifeguard and/or aquatics staff on duty.

Swim tests are administered every time the group swims. If a camper does not pass their test, they will be allowed in the pool only if they are wearing a personal flotation device (PFD), which Tiger’s Den provides. Campers wearing PFD’s are also restricted to the shallow end of the pool.

By signing below, I indicate I have read and understand the UREC Tiger’s Den swim test policy outlined above.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

LEGAL NAME OF CAMPER _____