

**APPLICATION – 2016 UR BOYS' BASKETBALL CAMP**

Name \_\_\_\_\_

Session I (June 27– July 1) \_\_\_\_ Session II (July 11-15) \_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Parents' Email \_\_\_\_\_

Ht. \_\_\_\_ Wt. \_\_\_\_ Grade (as of 9/16) \_\_\_\_\_

School \_\_\_\_\_ Birth Date \_\_\_\_\_

Ball (optional - \$10) \_\_\_\_

T-shirt size (circle one): YM YL AS AM AL AXL

**Insurance and Emergency Information**

Parent/Legal Guardian Name \_\_\_\_\_

Parent/Legal Guardian Phone \_\_\_\_\_

Emergency Contact (2) \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Insurance Company Phone Number \_\_\_\_\_

Policy Holder \_\_\_\_\_

Policy Holder Date-of-Birth \_\_\_\_\_

**CAMP TUITION IS \$275 per session.**

\$50 due with application / nonrefundable/ part of total cost

**MAKE CHECK PAYABLE TO:**

University of Rochester Boys' Basketball Camp  
Luke Flockerzi, Director  
Goergen Athletic Center  
PO Box 270296  
Rochester, NY 14627-0296

For Information call (585) 275-4306  
[lflockerzi@sports.rochester.edu](mailto:lflockerzi@sports.rochester.edu)

# 34<sup>th</sup> ANNUAL



**NATIONAL CHAMPIONS  
DIVISION III  
1990  
FINAL FOURS  
1990, 1992, 2002, 2005**

## **UNIVERSITY of ROCHESTER BASKETBALL CAMP**

**Session I - June 27-July 1, 2016**

**Session II - July 11-15, 2016**

**9am - 4pm**

**BOYS GRADES 3-10**

**2016**  
**Boys' Basketball Camp**  
**Session I – June 27-July 1**  
**Session II – July 11-15**  
**9am – 4pm**  
**Grades 3-10**

## PROGRAM

The University of Rochester Basketball Camp is designed to teach and drill campers in individual and team fundamentals of basketball.

Campers will be grouped by age and ability. Instruction in fundamentals will be based on the skill level of group. Emphasis will be given to drills and skills that campers can practice on their own at home.

Competitions will also be grouped by age and ability. Competitions will include individual skill contests as well as group, 3v3, and 5v5 games.

In addition, campers will have the opportunity to receive extra individual instruction throughout. They can also go swimming at the conclusion of each day. There is a swim test.

## CAMPER TO RECEIVE

- Five days of instruction and competition.
- **Cafeteria lunch each day.**
- T-shirt. Circle correct size on the application.
- OPTIONAL: Basketballs may be purchased for an additional \$10.00. To order, check the designated space on the application.

## CAMPER TO BRING

- Basketball shoes.
- Basketball. (Balls may be purchased for an additional \$10.00.)
- Swim suit and towel (optional).

DO NOT BRING UNNECESSARY VALUABLES.  
Lockers and locks will NOT be available.

## DAILY SCHEDULE

<b>9:00</b>	<b>Roll Call</b>
9:05	Warm-up / Stretch
9:20	Ball Handling / Shooting Progression
10:00	Teaching Stations (8)
11:00	Team Practice
11:15	5v5 Games / Free Throws
11:55	Lunch
12:00	Extra Instruction / Free Throws
1:00	Lecture / Group Instruction
1:30	Rochester Shootout
2:00	Team Practices
2:15	5v5 Games / Free Throws
3:00	Competitions
3:30	Extra Instruction / Free Throws / Swimming (Optional)
<b>4:00</b>	<b>Campers Dismissed</b>

## DIRECTOR & STAFF

Luke Flockerzi, Head Men's Basketball Coach at UR is the camp director.

In addition to current UR assistant coaches, the staff will consist of other college and high school coaches. Current and former college players may also be added to the staff.

## FACILITIES

The camp will be held indoors in the Goergen Athletic Center, one of the finest athletic facilities in the country.

An eight-lane swimming pool, with a separate diving well, will be open to campers at a designated time under the supervision of lifeguards.

A certified emergency medical technician or an athletic trainer will be available. Strong Memorial Hospital is across campus. Campers are required to provide their own coverage.

## TUITION & PAYMENT

**Tuition for the UR Basketball Camp is \$275.** There is a \$10 discount for additional siblings. Team discounts (\$10 per camper) are available for teams of 5 or more. The maximum discount per individual is \$10. For details call Luke Flockerzi (585-275-4306).

**A \$50 non-refundable deposit is due with the registration form and risk waiver. The remainder is due by the first day of camp.**

**Risk Waiver** - All camp participants must submit a signed Acknowledgement and Release Agreement prior to attending camp. The waiver should be sent with the registration form by mail.

Payments may be made by cash or check and are accepted by mail. **If you wish to pay by credit card, all payments must be made IN PERSON at the Goergen Athletic Center front desk.**

Each camper will be emailed confirmation of his enrollment, the notification of balance due and a UR campus map.



# UNIVERSITY of ROCHESTER

## PART I

### Acknowledgement and Release Agreement

I, \_\_\_\_\_, am the parent or legal guardian of \_\_\_\_\_, whom I wish to participate in the Boys Basketball Camp (the Activity) offered by University of Rochester. As a precondition to Participant participating in the Activity, I have read the following Release Agreement and agree to its terms.

1. **Assumption of Risk.** I understand that participating in the Activity entails inherent risks including, but not limited to, the risks described in this Activity Detail Form on the reverse side of this Release Agreement. I have read and understood the Activity Detail Form. I have been given the chance to ask questions about the Activity Detail Form and all such questions have been answered to my satisfaction.

Having read this form, I am fully aware of the risks and hazards associated with the Activity, and hereby elect to voluntarily participate in the Activity. I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that I may sustain as a result of participating in the Activity, unless caused by the gross negligence or willful misconduct of U of R, its officers, trustees, agents, employees or volunteers (the "Releasees"). I understand that I am not required to participate in the Activity and that I choose to do so voluntarily and free of duress.

2. **Liability Release.** In consideration for U of R allowing me to participate in the Activity, I agree I will not sue the Releasees and I hereby release and indemnify the Releasees from any and all liabilities, claims, demands, actions, causes of actions, costs and expenses of any nature whatsoever arising out of any loss, personal injury (including death) or property damage, that I may sustain, arising from the Activity or while upon the premises where the Activity is being conducted, unless due directly to the gross negligence or willful misconduct of the Releasees.

3. **Statement of Physical Fitness.** I state that I am physically fit and in a condition that will allow me to participate fully and safely in the Activity. I maintain medical insurance that covers me for accidents and illnesses while I am participating in this Activity. I understand the Releasees have not made, nor will make, any investigation into my physical fitness or ability to participate in the Activity and Releasees are relying on my statement of my physical condition. I assume full responsibility for payment of medical expenses not covered by my insurance incurred as a result of my participation in the Activity.

4. **Emergency Medical Treatment.** I grant the Releasees permission to authorize emergency medical treatment as they deem appropriate, and agree that such action by the Releasees shall be subject to the terms of this Agreement. I understand and agree that the Releasees assume no responsibility for any injury or damage that might result from such emergency medical treatment.

5. **Governing Law.** I agree that this Agreement and any claim arising from my participation in the Activity shall be construed in accordance with the laws of the State of New York, without regard to its conflict of laws principles. The courts in Monroe County shall be the forum for any lawsuits arising from the Activity or relating to this Agreement. The terms of this Agreement shall be severable, such that if a court of competent jurisdiction holds any term to be illegal or unenforceable, the validity of the remaining portions shall not be affected thereby.

*In the event of an emergency, the emergency contact that is listed on my registration form will be contacted via phone by a staff member as soon as possible.*

#### ACTIVITY DETAIL FORM

**Name of Activity:** University of Rochester Boys Basketball Camp

**Date(s) of Activity:** Session 1: June 27-July 1, 2016 and/or Session 2: July 11-15, 2016

**Location of Activity:** University of Rochester, Goergen Athletic Center, Spurrier Hall

**Description of Activity:** The University of Rochester Boys' Basketball Camp is designed to teach and drill campers in individual and team fundamentals of basketball. Campers will be grouped by age and ability. Instruction in fundamentals will be based on the skill level of the group. Competitions will also be grouped by age and ability. Competitions will include individual skill contests as well as 3 versus 3 and 5 versus 5 games. Campers will have the opportunity to receive extra individual instruction throughout and can also go swimming at the conclusion of each day.

**Various activities including, but not limited to:** Basketball-related drills and competitions; Swimming.

**By participating in these activities you may be exposed to several inherent risks, including but not limited to those listed below:**

Physical injury, including but not limited to broken bones, concussions or other head injuries, organ damage, torn ligaments and tendons, cardiac injury, and even death. These may be accompanied by psychic injury or mental anguish. These risks may result from participation in practices, training drills and competitions, and during travel to and from practices and competitions.

**In signing this Agreement, I acknowledge that I have read both sides of this Release Agreement form, understand it, and agree to be bound by its terms. I further acknowledge that I sign this Release Agreement voluntarily and I am at least eighteen years of age (or that I am the Parent/Guardian of the Participant if he or she is under 18).**

\_\_\_\_\_  
Name of Parent or Legal Guardian (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Participant (printed)

\_\_\_\_\_  
Phone number where parent/legal guardian  
can be reached in case of emergency

\_\_\_\_\_  
Date

**THIS IS A RELEASE OF LEGAL RIGHTS. READ AND UNDERSTAND BEFORE SIGNING.** (Rev. 4/98)

**(SEE REVERSE)**

**PART II**

**University of Rochester Boys Basketball Camp**

**Rules and Regulations**

- 1) The possession or use of alcohol and other drugs, fireworks, guns and other weapons is prohibited.
- 2) Participants may not leave University property or the program without permission of the Program Sponsor.
- 3) No violence by anyone involved with the, including sexual abuse or harassment, will be tolerated. Hazing is prohibited. Bullying, including verbal, physical, and cyber bullying, are prohibited.
- 4) No use of tobacco products.
- 5) Misuse, damage or theft of property is prohibited. Charges will be assessed against those participants who are responsible for damage, theft or misuse of University property.
- 6) Participants must follow all safety rules in accordance with University standards and/or as defined by the program administrator.
- 7) Use of cameras, imaging, and digital devices is prohibited where privacy is expected, such as showers, locker rooms and restrooms.
- 8) As the parent or legal guardian, I declare that I have read, understand, and approve the rules, and give permission for my child to participate in the University of Rochester Boys Basketball Camp.

*Any participant who is found behaving in direct violation of these rules will be removed from the camp immediately.*

**In signing this Agreement, I acknowledge that I have read Part II of this Release Agreement form, understand it, and agree to be bound by its terms. I further acknowledge that I sign this Release Agreement voluntarily and I am at least eighteen years of age.**

\_\_\_\_\_  
Name of Parent or Legal Guardian (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Participant (printed)

\_\_\_\_\_  
Date

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**(PLEASE DETACH AND KEEP PART III FOR YOUR RECORDS)**

**PART III**

**Emergency Contact Information  
(Parent/Guardian to keep this page)**

In the event of an emergency during the activity that requires immediate contact of the coaching staff, a participant, or UR security, please use the contact information listed below to reach the staff members.

Name: Luke Flockerzi Office: 585-275-4306 Cell: 413-478-2340

UR Security – (585) 275-3333

In the event of an emergency (medical, behavioral, disaster, or significant program disruption) during the activity that requires immediate contact of the participant’s parent/guardian, the staff will use the emergency the contact name and phone number which were provided by the participant. This information is recorded and filed by the staff as a part of the registration process.