

### <u>PART I</u> Acknowledgement and Release Agreement

Phone number where parent/legal guardian

can be reached in case of emergency

Date

Name of Participant (printed)

#### **PART II**

## **University of Rochester Soccer Camps – Girl's Residential 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 \_\_University of Rochester Soccer Camp Girl's Residential Camp\_\_.

Any participant who is found behaving in direct violation of these rules will be removed from the UR Soccer Camp – Girl's Residential 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		

#### **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.

(List coaches who will be at event):

Name: Sike Dardaganis Office: 585-276-5101 Cell: 585-615-6970

Name: Ashley Van Vechten Office: 585-276-5101 Cell: 585-752-1122

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.