

Sports Camps and Clinics Approval Form



Please complete and submit this form to the Compliance Office prior to the camp or clinic and prior to advertising the camp or clinic in any manner. This form should be submitted in conjunction with your request to reserve IPFW facilities.

Name of Requesting Coach: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Camp: \_\_\_\_\_

Date(s) of Camp: Starting Date \_\_\_\_\_ Starting Time \_\_\_\_\_

Ending Date \_\_\_\_\_ Ending Time \_\_\_\_\_

Location of Camp: \_\_\_\_\_

Camp Owner(s): \_\_\_\_\_

Camp Administrator(s): \_\_\_\_\_

Purpose of Camp: \_\_\_\_\_

Housing of Campers: \_\_\_\_\_

Housing of Employees: \_\_\_\_\_

Grade(s) in school (most recent academic year) of camp participants: \_\_\_\_\_

Restrictions on participants (e.g., age, gender, number): \_\_\_\_\_

Methods of soliciting participants (e.g., brochure, advertisements, emails, websites): \_\_\_\_\_

Camp Fee: \_\_\_\_\_

Reduced or free admissions (e.g., group rate): \_\_\_\_\_

Item(s) and value of item(s) provide to camp participants (e.g., t-shirt - \$10, ball - \$20): \_\_\_\_\_

Is the cost of the item(s) provided to camp participants included in the camp fee? YES NO

Award(s) and value of award(s) provided to camp participants (e.g., trophy - \$5, certificate - \$1): \_\_\_\_\_

Is the cost of the award(s) provided to camp participants included in the camp fee? YES NO

List specific individuals or organizations that you have partnership agreements with that are not associated with IPFW. Include all camp shops, vending, pizza, clothes, etc.

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Nature of camp employees (e.g., IPFW coaches, high school coaches, IPFW student-athletes, student-athletes from other schools): \_\_\_\_\_

For any student-athlete employed by your camp, describe his/her responsibilities/duties: \_\_\_\_\_

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**Required for Approval:** A copy of all methods of soliciting participants (e.g., brochures, advertisements) and a copy of the camp itinerary.

**Basketball Only:** Please contact the Compliance Office to schedule a time during each camp involving those of prospect age for the educational session as required by NCAA legislation.

By signing this form, I am indicating that to the best of my knowledge, this camp is in compliance with NCAA legislation ***and that subsequent to this date, I will notify the Compliance Office of any potential problems that may arise regarding any of these camps/clinics and any NCAA rules or regulations.***

Signature of Requesting Coach: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Compliance Office: \_\_\_\_\_ Date: \_\_\_\_\_