

# Thank you for registering for the adidas Tennis Camp in (Lake Oswego High School)

We're looking forward to seeing you at camp this summer! We hope that this camp will be an unforgettable and exciting experience for you to improve your skills and work with some of the top coaches from across the country!

Please read the packet below as this information is extremely important. Feel free to call us with any questions at 800.944.7112 or email us at <a href="mailto:support@tenniscamper.com">support@tenniscamper.com</a>. This packet can be downloaded at <a href="mailto:www.TennisCamper.com">www.TennisCamper.com</a>, under "Download Forms".

## Check In/Out- all campers

June 26th: 8:45am at the tennis courts

Full day campers should be picked up daily at 4 PM each day at the tennis courts. Lunch is NOT included. Please bring a bagged lunch each day.

Half day campers should be picked up daily at 12 PM each day.

#### **Check Out Location**

Daily at the courts. Parents are encouraged to attend the final session on the last day! Check out will occur immediately after the closing ceremony at the courts around 3:30pm.

#### **Tennis Court Address:**

2501 Country Club Rd, Lake Oswego, OR 97034

## **Camp Phone Number**

adidas Tennis Camp Office: 800.944.7112 Director: Steven Huynh # 971.506.3960

#### **Spending Money and other Valuables**

It is not recommended that excessive amounts of cash be brought to camp. Please remind your camper to keep any spending money in a secure place. We also try to discourage campers from bringing electronic devices such as iPods and laptop computers. The adidas Tennis Camps are not responsible for the theft or loss of personal items.

#### **Health Form**

<u>IMPORTANT!</u> Campers will not be admitted to camp without this form! adidas Tennis Camp Health Form

 Please fill out and bring to check in on the 1<sup>st</sup> day of camp.

#### **Health & Safety**

We want to ensure your child a safe and positive environment during their time at camp. Drugs, alcohol, and cigarettes are strictly forbidden, and will result in immediate dismissal from camp without a refund.

#### Transportation

adidas Tennis Camps does not provide transportation from airports, train stations or bus stops.

## **Payments**

Final Payments are due in our office by **May 15<sup>th</sup>.** If you have a balance and would like us to charge it to your credit card, please call us at 800.944.7112.

#### Don't Forget to Tell Your Friends!

Space is still available so remember to tell your friends and teammates about the camp! They can register over the phone or online at <a href="https://www.TennisCamper.com">www.TennisCamper.com</a>.

## **Packing List**

<u>Health Form</u>
Tennis racquet(s), tennis shoes (no black soles)
Water jug
T-Shirts
Shorts
Sunscreen
Hat

### **Cell Phone Policy**

In order to provide the ideal camper experience, we believe in limiting the use of cell phones and other electronic devices while at camp. Use of phones is not permitted during the instructional blocks of camp, including on-field and classroom sessions. We feel this will minimize distractions to the learning environment, help maintain an inclusive atmosphere and alleviate potential problems that can detract from the overall experience for everyone. Phone use will be allowed during in the mornings prior to morning session, at lunch, and for overnight camps before and after the evening session. We will still encourage players to minimize their time on devices in order to interact and engage with other campers, but understand they might want the chance to call home, text friends, etc

### **Cancellation Policy**

Any Camper who must cancel their registration more than fifteen (15) days prior to the camp start date will receive a voucher equal to the full amount of camp tuition already paid which may be used toward any program or camp offered by eCamps. If a camper must cancel their registration fourteen (14) days or fewer prior to the start of camp, eCamps will issue camper or parent a voucher equal to 50% of the camp tuition, which can be transferred to a future program or camp within the same calendar year or next calendar year. The voucher is also transferable to another family member and is good for any camp offered by eCamps within one year of the date of purchase. Camp vouchers are not extended to campers who leave camp after the start of a session. **Cash refunds are not offered under any circumstances.** 

If eCamps Sports Network is forced to postpone your child's 2023 summer camp due to the facility being closed or by government mandate, you will receive a camp credit voucher for tuition fees paid (never expires, fully transferable & for any sport).

# adidas Tennis Camps Summer Camp Health Record and Release Form

Every camper must have this health record filled out for camp and brought to camp check-in. Camps held in the following states require this form to be completed and signed **by a physician** before your child can participate at summer camp (CT, MA, NY).

PLEASE DO NOT MAIL AHEAD.

Camp Attending:	Immunization History (Please List Dates)
	Copy of Immunization Record Preferable.
Name: Last First M.I.	DPT Booster
Last First W.I.	 DT
OOB: Age: Sex:	
	Polio OPV (Sabin)Booster
Parent/Guardian:	Measles/Mumps/Rubella (MMR) #1 #2
Address:Phone (Home):	Hepatitis B #1#2#3
Phone (Cell):	
Phone (Work):	Chickenpox
Emergency Contact:	Tetanus
Address:Phone (Home):	Turberculin
Phone (Cell):	
· /	Pneumococcal Conjugate
<u>Health History</u>	Haemophilus Influenza b (HIB)
May Participate in all camp activities	Covid-19 #1Booster
May participate except for	
Does this individual have allergies? YES NO	Insurance Information
Explain:	Health Insurance Provider:
	Policy/ID Number
s this individual on a special diet? YES NO	Policy Holder's Name & DOB
Explain:	Insurance Provider Contact: Phone
	Mailing Address
Does the individual have special needs? YES NO  Explain:	Please include a photocopy of your Health Insurance card for our records.
	Parent's Authorization
	This health history is correct so far as I know, and the person herein
have examined the above camper within the past two years.	described has permission to participate in all activities except as noted. I
Date Examined	give my child permission to be treated by emergency response personnel. I
	understand that every attempt will be made to contact me, or the
Physician's Signature	emergency contact, before taking this action. I hereby waive and release
Physician's Name	the adidas Tennis Camps, staff, camp management and sponsors from any liability for any injury or illness incurred while at camp. I
Today's Date	UNDERSTAND THAT THERE IS A RISK OF INJURY TO MY CHILD
Address	AS A RESULT OF CAMP ACTIVITIES, AND KNOWINGLY AND
Phone	VOLUNTARILY ASSUME ALL RISK OF SUCH INJURY. I will be

PLEASE NOTE: A DOCTORS SIGNATURE IS ONLY REQUIRED FOR CAMPS IN CONNECTICUT, MASSACHUSETTS, AND NEW YORK.

\*\*\*NOTE\*\*\*All medication will be checked and kept by the trainer. All prescription medications must be in their original case/box with the legible prescription label; including inhalers. The "prescribers authorization form" must accompany all medication and requires the physician's signature in CT, MA & NY. The Administration of Medication Form must accompany all medication for camps in CT. This form is available for download on TennisCamper.com.

financially responsible for any medical attention needed during camp.

Date

Parent Signature\_\_\_\_