

## 2018 Rules & Regulations

Camper's Name (Last): \_\_\_\_\_ (First): \_\_\_\_\_

1. Campers must attend all sessions, unless otherwise excused by a trainer or camp director.
2. There will be no females allowed in your residence room at any time. Treat the women around the campus with respectful manners.
3. Room curfew is at 10:30PM and you are not allowed out anytime thereafter. Lights out is at 11:00pm. Room check will be between 10:45pm-11:00pm each night.
4. Possession of Drugs, alcohol, and cigarettes is prohibited.
5. Campers are only permitted to travel to areas indicated on the camp itinerary (designated athletics facilities and Sutherland Hall) and must always be accompanied by a counselor(s). Travel to non-sanctioned areas of campus or to off campus locations is prohibited unless approved by senior staff and accompanied by a counselor.
6. No fighting, hazing, or bullying.
7. Treat residence halls and facilities with respect. **You will be responsible for any damages.**
8. All campers are required to abide by the law.

***Failure to abide by the above rules may result in dismissal from camp. The camper's parents will be notified immediately and required to pick up the camper by the next day at the latest. No refund of camp fees will be given for any campers who are dismissed for violation of the rules herein.***

*Our signatures indicate that we have read the rules and regulations, understand them, and agree to abide by them. Failure to sign and return this document will prohibit the camper from participating in the camp program.*

Camper Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## 2018 Release & Consent Agreement

Pitt Wrestling Camps, LLC, is sponsored and run by Jordan Leen, and it may be held at the University of Pittsburgh and use some of the University's facilities. However, Pitt Wrestling Camps, LLC, and its staff are not sponsored or run by the University, and all camp employees are not employees or agents of the University in their operating of the camp.

Please read the following agreement carefully before signing.

**CERTIFICATION OF PHYSICAL FITNESS TO PARTICIPATE**

1. I understand that a risk of participating in any sport, including Pitt Wrestling Camps, is the risk of injury, including but not limited to serious permanent injury, paralysis, and death. To minimize the risk of injury, I agree to tell my child to obey all safety rules and to report fully any problems related to his/her physical condition to the summer camp coaches or assistants as soon as the problem begins.
2. By signing below, I certify the following:
  - That my child is not currently under the care of a physician for an injury or illness that would prevent his/her safe participation in the summer camp;
  - Is free of communicable disease of any kind;
  - That my child is not currently being treated for or recovering from an orthopedic injury that would prevent his or her safe participation in the summer camp;
  - That my child does not have a contagious condition that could be spread to other campers or staff
  - That my child has no history of fainting or other problems related to strenuous exercise; and
  - That my child is in good health and there is no reason he or she cannot safely participate in strenuous physical activity.

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_

**CONSENTS**

1. By my signature below, I hereby give permission for Pitt Wrestling Camps, LLC., and its employees and agents to obtain medical treatment for my child, \_\_\_\_\_, in the event of accident or illness during his/her presence at the camp.
2. By my signature below, I hereby give consent to have my child be photographed or video or audio-taped during camp activities, and I agree that the images so obtained may be used for educational and public relations purposes by Pitt Wrestling Camps, LLC.

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_

**RELEASE**

1. In consideration for accepting my child into Pitt Wrestling Camps, LLC., which uses University facilities, I do hereby agree that I am and shall be responsible for all costs associated with any injury or loss that may be sustained by my child as a result of his or her participation at the camp. I also certify that I have health insurance, which provides adequate coverage for injuries or illness my child may sustain while participating in Pitt Wrestling Camps, LLC.
2. By my signature below, I also agree to release and promise not to sue the University of Pittsburgh, or their employees or agents, for any damages, loss, injury, or death arising from my child's participation in Pitt Wrestling Camps, unless such damages, loss, injury, or death are caused by the gross negligence or intentional gross misconduct of such employees or agents.

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_