

## Health & Liability Form

Camper's Name \_\_\_\_\_

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

Street Address \_\_\_\_\_

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

Camper's Home Phone \_\_\_\_\_ Parent/Guardian Business Phone \_\_\_\_\_

→ List any physical conditions that the SuperCamps Staff or a physician should be aware of (i.e., allergies, reoccurring illnesses, disabilities, chronic illnesses, etc.) \_\_\_\_\_

→ In case of injury, I understand that I will be contacted during the child's examination in the emergency department. If I am not available, please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

List month and year in which this camper received the following immunizations:

Hamophilus Influenza B \_\_\_\_\_ Hepatitis B \_\_\_\_\_ Varicella (Chicken Pox) \_\_\_\_\_

Diphtheria \_\_\_\_\_ Tetanus \_\_\_\_\_ Measles \_\_\_\_\_ Mumps \_\_\_\_\_

Rubella \_\_\_\_\_ Poliomyelitis \_\_\_\_\_ Whooping Cough \_\_\_\_\_

NOTE: The immunization information MUST be completed in order for your child to participate!

Insurance Co: \_\_\_\_\_ Subscriber Name: \_\_\_\_\_

Subscriber ID#: \_\_\_\_\_ Plan #: \_\_\_\_\_ Group #: \_\_\_\_\_

→ In the event that I am unavailable for purposes of providing parental consent, I hereby authorize the SuperCamps & SuperClinics staff at the host facility, or a physician to provide such hospital care that includes routine diagnostic procedures and medical treatment as necessary for my child. I understand that the consent and authorization granted herein does not include major surgical procedures and is valid only during the SuperCamp for which my child is registered.

→ I understand that neither SuperCamps & SuperClinics nor the host facility provides medical insurance for campers, and that in the event of injury requiring treatment, hospitalization, and/or surgery, our family medical insurance must be used, and I further represent that such insurance will be in effect during my child's camp stay.

→ I agree to assume full responsibility for any damages to property as a result of my child's actions while at camp. I further agree to reimburse the host facility for said damages.

→ I hereby waive and release SuperCamps & SuperClinics and the host facility from any and all liability for any injuries incurred by my child while attending camp.

→ I understand that my child is not to have a car on campus, and I have verified this with my son/daughter. Failure to comply will result in dismissal from camp.

→ I have read and accept the earlybird discount program and refund policy within.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# Things to Know

## MEDICAL INSURANCE

**SuperCamps & SuperClinics**  
does not provide medical insurance for campers!

In the event of illness or injury requiring treatment, hospitalization, and/or surgery, family medical insurance must be used. SuperCamps & SuperClinics strongly recommends that camp participants be covered by personal/family insurance. Insurance information must be provided on the attached registration/health form. The signature of a parent or guardian granting permission to administer medical attention, if necessary, is required on the registration form. Medical care is provided by EMT's and certified athletic trainers, and care is available during the camp sessions and in the residence hall areas in the evening and at night. Medical emergencies are referred to the Health Center at the host facility or to area hospitals if necessary.

### REGISTRATION

1) Complete the enclosed registration form. **BE SURE TO COMPLETE BOTH SIDES, INCLUDING THE REQUIRED HEALTH / IMMUNIZATION AREAS!** Send your registration to:  
SuperCamps, PO Box 541,  
Canandaigua, NY 14424.

2) A non-refundable deposit must be enclosed with your registration, and received by July 1st to reserve your spot! Full payment must be received by July 15th or SuperCamps has the right to go to its waiting list. \*\*A \$25.00 late fee will be charged for all new registrations and final payments received after July 15th. There will be **NO EXCEPTIONS** to this policy. Please forward final payments and/or applications in a timely fashion. Thank you.

### EARLYBIRD DISCOUNTS

• If applications/paid in full amounts of four or more participants from one team/school are submitted together in one envelope by May 1, 2010, a total of \$20.00 per person may be taken!

### REFUNDS

• Refunds will be given for medical reasons only! Upon receipt of a doctor's note, the participant will be given full credit toward a future SuperCamp or SuperClinic.

### OTHER

- Upon receipt of your application, a confirmation letter will be mailed out containing detailed information regarding directions, what to bring, registration/pick-up times, etc.
- Commuters attend 8:30 AM - 9:00 PM (lunch/dinner provided)
- Make checks payable to:

### SuperCamps & SuperClinics

**SuperCamps & SuperClinics** has a N.Y.S. Dept. of Health permit to operate and is inspected twice yearly. Inspection reports and required health plan will be on file and available for review.

## PLEASE REMEMBER!

Enrollment is **LIMITED**, and registrations will be accepted on a "first-come/first-served" basis! **Don't delay!-Mail today!**

Questions?... Call Coach Guy at (585)394-4299.

SuperCamps and SuperClinics  
presents...

2010

Celebrating our  
21st Year!

# Boys Youth Lacrosse Skills SuperCamp

at Finger Lakes  
Community College  
Canandaigua, New York  
July 11th-15th

Current Grades  
3rd-8th

## PARENTS

*Do you desire a camp that provides a positive, well-rounded competitive experience for your son? Do you insist on a safe environment, and experienced staff and quality supervision during your son's stay? Would your son benefit from a camp that emphasizes SKILL DEVELOPMENT and FUNDAMENTALS, rather than the "games only" approach taken by other camps? Would you like all of this at a reasonable rate?*

***Our SUPERCAMP is all of this and more!***

## We Teach Skills!

*SuperCamps is a comprehensive skills camp teaching offensive, defensive, and team lacrosse concepts/techniques by high quality, proven, successful coaches.*

***At SuperCamps, Fundamentals are... FUNDAMENTAL!***

## Let our experience be your guide!

*You will learn skills! We Promise... Players will leave this camp with an evaluation and off-season training program to further continue their development.*

Check us out on our web page at

**www.supercampsandclinics.com**

*(Additional brochures available on-line!)*

## WHAT IS THE SuperCamp DIFFERENCE!?!...

Our staff has been carefully selected and includes some of the best lacrosse coaches in the area. They are here to **TEACH** and make you a total player. We have proven, successful coaches! Check us out!

We teach **FUNDAMENTALS!** Our emphasis is on total player development. Players have easy access to indoor facilities and outdoor fields. Unlike other camps, we **DO NOT** need to bus our participants to other sites. All facilities are within a short walking distance, including our excellent dining facilities and spacious suite style residence halls.

### EACH CAMPER RECEIVES...

- ✓Free SuperCamp T-SHIRT!
- ✓Free Personal Water Bottle!
- ✓Quality Individual & Group Instruction!

*An exceptionally safe, secure and enjoyable campus environment!*

## The Program

### Personal Instruction:

This area will focus on individual skill and development. Players learn and drill ground ball, defense, stick handling, faking, footwork, and shooting skills. They have a unique opportunity to learn how to perform individual skills with top high school and college coaches in *small group* sessions.

### Small Group Instruction:

This area will focus on group skills needed to play team defense, transition and offense. The skills taught include the pick and roll on offense, switching and communication on defense, and 2 vs. 1 through 5 vs. 4 on transition. The skills are practiced in small groups to allow for maximum instruction.

### Evening Games:

In this area players practice and apply what they have learned into a game setting.

### Special Events:

There are two shooting contests, one for speed and one for accuracy. The first, second, and third place winners will receive prizes.

- We emphasize the teaching aspect of camp more than just playing
- The camper to coach ratio is very low
- Individual instruction for goalies (cost reduced)
- Great camp for first time overnighiter

Just when you thought camp couldn't get any better, **SUPERCAMPS** steps in to take you to new heights.

*5th and 6th grade team option. Bring your entire team (minimum 15 players) and compete against other 5th-6th grade teams at camp.*

**Team discounts offered!**

## WHAT MAKES A GREAT LACROSSE CAMP? COACHING

### TECHNICAL TRAINING STEP-BY-STEP

#### CAMP DIRECTOR

#### JOHN C. JOHNSON

Coach Johnson is entering his fifth year as the head coach at St. John Fisher college after 26 years as the head coach at Canandaigua Academy. Coach Johnson has won over 400 games during his career including 6 Section V championships, 13 Finger Lakes titles and 4 Western New York Championships. Coach Johnson was 7 times named the Finger Lakes Coach of the Year and in 2008 was inducted to the U.S. Lacrosse Hall of Fame. Much of Coach Johnson's success has come from his strong belief in developing fundamentals as the way to achieve your goals.

#### Mark Rice

- Assistant Lacrosse Coach at St. John Fisher College
- Coached at Penfield High School for 32 years
- 300+ wins
- 4 Sectional Titles, 5 Monroe County Titles
- 13 All-Americans
- Inducted into Rochester Chapter of the U.S. Lacrosse Hall of Fame 2008

#### Dave Stein

- Head Coach at FLCC
- 2008 Mid Conference Coach of the Year
- All Conference Mid-Fielder at Michigan State
- Former Head Coach at Aquinas, Newark
- Outstanding clinician

*The Supercamp staff will include other quality High School coaches, as college players to serve as junior instructors and aid in supervision.*

***We have an 8-1 staff-to-player ratio! We give you the attention you deserve and need to improve your game!***

### LIMITED ENROLLMENT

Enrollment is limited to 160 athletes, not the 300+ that some camps try to fit into a week! This ensures that each camper will receive the INDIVIDUAL ASSISTANCE he deserves. Our emphasis is on TEACHING the fundamentals of the game and developing the SKILLS necessary for our athletes to excel. **We believe** the QUANTITY of athletes in attendance is not nearly as important as the QUALITY of the instruction they receive.

## CAMPER REGISTRATION FORM

Camper's Name \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_

Campers Age \_\_\_\_\_

Usual Position \_\_\_\_\_

Coach's Name \_\_\_\_\_

Coach's Home Phone \_\_\_\_\_

Camper's Email Address \_\_\_\_\_

Your Grade in School as of May 1, 2010  
Grade \_\_\_\_\_

Please check the SuperCamp You Wish To Attend, and indicate payment below

	Check One Below	Full Payment	Deposit
<b>BOY'S YOUTH LACROSSE CAMP AT FLCC</b>	<b>Basic Fees (If paid in full by July 1st)</b>		
	Resident Camper	___\$395	___\$150
	Day Camper	___\$245	___\$150
<b>JULY 11-15</b>	<b>Basic Fee (If paid in full after July 1st)</b>		
	Resident Camper	___\$420	___\$150
	Day Camper	___\$270	___\$150

(for office use only)

F / P

Check #: \_\_\_\_\_

Total Amount Remitted: \_\_\_\_\_

PLEASE NOTE: This form may be photocopied for other teammates. Upon receipt of your Registration/Health Form, a confirmation will be sent to you. Please keep the other half of this form, which contains additional information for campers. You will receive additional information and details from your coach.

T-Shirt Size...

(Circle One!) Medium Large X-Large

Roommate Request

(One name only) \_\_\_\_\_

Make checks payable to:

**SuperCamps & SuperClinics**

Send completed (both sides!) registration form, along with payment to:

**SuperCamps & SuperClinics,  
PO Box 541, Canandaigua, NY 14424.**

**You MUST complete the MEDICAL/HEALTH FORM on the reverse side of this page!**