



2019 Camden Health & Athletic Association Summer Golf Academy

Dear School Leaders,

The Camden Health & Athletic Association (CHAA), in partnership with the City of Camden, will host a 2019 Summer Golf Academy (Academy) from July 8th to August 14th. The second year program will introduce 25 Camden City youth athletes ages 11 to 14 to the basic fundamentals of golf, skills & drills, as well as business and career opportunities associated with the game. The program will provide spots for 25 student athletes.

Nomination Process: The Academy will accept 25 participants – boys and girls. Participants must be nominated by their school and must submit a completed application and signed forms. Completed applications will be accepted on a first come first served basis. Deadline to submit the nomination forms, necessary waivers and contact forms is **June 21, 2019**. CHAA will work closely with all schools to assist with the nomination process, receiving the necessary nomination forms and reviewing forms for completeness.

PROGRAM DETAILS

- **Location:** Camden County Golf Academy, Valleybrook Country Club, Ramblewood Country Club
- **Schedule:** July 8th to August 14th
- **Days and Hours Per Week:** 2 days a week, 2 hours a day (Monday, and Thursday)
- **NO COST:** No cost for the youth athletes to participate in the Academy
- **Transportation:** The program will provide transportation through a bus/van service to and from the facility. The selected students will be picked up every, Monday, and Thursday in front of City Hall at 12:45 PM and return to City Hall at 4:00 PM. ***The campers will be responsible for transportation to and from the City Hall*
- **Instruction:** Instruction will be provided by professional golf instructors from First Tee of Greater Philadelphia and Fred Baxter, former Head Golf Coach at Widener University and NFL tight end who played for the New England Patriots, New York Jets, and Chicago Bears during his 12-year career.
- **Additional Opportunities/Facility Use:** In addition to attending training sessions at CCGA, the program will also provide an opportunity for the students to attend a golf driving range.
NOTE: Additional waivers may need to be completed for this portion of the program.
- **CHAA supervision:** CHAA will be present at all sessions with the youth athletes
- **Golf Clubs:** The clubs will be provided on loan by CHAA.



GOLF ACADEMY PROGRAM REQUIREMENTS

- **Nomination Process:** The Academy will accept 25 participants – boys and girls. Participants must be nominated by their school and must submit a completed application and signed forms. Completed applications will be accepted on a first come, first served basis. Deadline to submit the nomination forms, necessary waivers and contact forms is **June 21, 2019**. CHAA will work closely with all schools to assist with the nomination process, receiving the necessary nomination forms and reviewing forms for completeness.
- **Eligible Youth Athletes:**
 1. Camden City residents between the ages of 11 and 14.
 2. Must be able to complete the 6 week program and attend all sessions.
- **Athlete Nominations:** All athletes must be nominated by a Camden school to be eligible for the 2019 Academy program.
- **Required Forms:**
 1. **CHAA Nomination Form:** CHAA 2019 Golf Academy Nomination Form must be completed and signed by parent/guardian of nominated youth athlete.
 2. **CHAA Waiver:** CHAA 2019 Golf Academy WAIVER Form must be completed and signed by parent/guardian of nominated youth athlete.
 3. **Additional Waivers:** Additional waivers may be required for youth athletes accepted into the Academy relating to transportation services and use of additional driving range and/or golf courses.
- **Acceptance into Program:**

Youth athletes will be accepted into the program on a first come first serve basis. All forms must be completed in full to be considered for the program. There are only 25 available camper spots in the 2019 Academy. Once all spots are filled, CHAA will maintain a waiting list for the program, but provides no guarantee that any youth athletes on the waiting list will have the opportunity to participate in the program.
- **Notification of Acceptance into Program:** CHAA will notify the student youth athletes, his/her parent/guardian and the nominating school of the student's acceptance into the program. At that time, the camper will receive the additional information necessary for the program.

Nomination Submissions

All nominations must be submitted to Al Dyer, CHAA Executive Director no later than **June 21, 2019**.
Submitted nominations will be accepted on a first come first served basis.

If you have any questions, please contact Al Dyer, Athletic Executive Director, Camden Health & Athletic Association, Sheridan Pavilion, 3 Cooper Plaza, Suite 500, Camden, NJ 08103
dyer-amar@cooperhealth.edu or 856.583.2160



2019 Summer Golf Academy Youth Athlete Nomination Form

1. YOUTH ATHLETE NOMINATION INFORMATION:

Name: _____ Date of Birth: _____ Grade: _____

Address: _____ City/State/Zip Code: _____

Phone Number: _____ Shirt Size: _____

Email: _____

2. NOMINATION BY:

Name: _____ Title: _____

School: _____

Phone Number: _____ Email: _____

3. PARENT / GUARDIAN CONTACT INFORMATION:

Parent/Guardian Name 1: _____ Parent/Guardian Name 2: _____

Relation: _____ Relation: _____

Address: _____ Address: _____

City, State, Zip Code: _____ City, State, Zip Code: _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

Work Phone: _____ Work Phone: _____

Email: _____ Email: _____

4. PARENT/GUARDIAN AUTHORIZATION

Parent/Guardian Name (Print Name) _____

Parent/Guardian Signature _____



Camden Health & Athletic Association

Sheridan Pavilion
3 Cooper Plaza, Suite 500
Camden, NJ 08103

CHAA@cooperhealth.edu
ph: 856.583.2160

Summer 2019 Golf Academy – PERMISSION AND WAIVER FORM

July 8, 2019 – August 14, 2019

I, _____* (or we, as the case may be), and _____ as, parent(s) or legal guardian(s) (collectively, the “Guardian”) of _____* (the “Minor”), (the Minor and the Guardian being hereinafter sometimes referred to collectively as the “Releasors”), hereby give permission for the Minor to participate in the **Summer 2019 Golf Academy on July 8, 2019 through August 14, 2019** (the “Academy”). In consideration for the opportunity of the Minor to participate in the Academy, I do hereby agree with the Camden Health & Athletic Association (“Company”) that the Releasors hereby release, and will not, individually or as parent(s) or legal guardian(s) of the Minor, sue or bring any legal action or proceeding against the Company, any sponsors of the event including their respective directors, officers, employees, instructors, agents, volunteers, staff, affiliates, related entities (including, without limitation, parent companies) or legal representatives or successors and assigns (collectively, the “Releasees”) for or on account of any claim, injury, pain, suffering or damage that the Minor may sustain directly or indirectly by virtue of arising out of the Minor’s participation in the Academy.

This Release and Waiver may be pleaded as a complete defense to any action or other proceeding which may be brought, instituted, or taken by any of the Releasors, the Releasors’ guardians, parents, heirs or legal representatives against any of the Releasees. The Releasors acknowledge that participation in the Academy by the Minor is without assumption of responsibility or risk of any kind by any of the Releasees, and the Releasees do not make any warranties of any kind with respect to the Academy or its safety. The Releasors assume the risk of all dangerous conditions arising from and inherent in participation in the Academy and waive any and all specific notice of the existence of such conditions.

This Release and Waiver is executed by the Releasors not in satisfaction of any damages sustained nor as compensation for injuries, nor in settlement of any claim or damages. The opportunity of the Minor to participate in the Academy is offered as consideration for this Release and Waiver and the agreements contained herein. It is understood and agreed that the acceptance of this Release and Waiver by the Releasees is not an admission of any liability on their part and that each of the Releasees expressly denies any liability in any manner.

The Releasors acknowledge that there are inherent risks in all athletic activities and related events, including the risks of serious bodily injury and death, and the Releasors hereby assume all dangers and risks associated therewith. These may result not only from Releasors’ own actions, inactions, or negligence, but the actions, inactions, or negligence of others, the rules of play, or the condition of the facilities, equipment, or vehicles involved in the Academy. Further, there may be other risks not known to Releasors or reasonably foreseeable at this time. Releasors understand and Releasors have considered and evaluated the nature, scope, and extent of the risks involved, and Releasors voluntarily and freely choose to assume these risks, even if it is due to the negligence or other fault of the Releasees. The Releasors understand that the Releasees will not provide the Releasors with any insurance, either life, medical or liability, for any illness, accident, injury, loss, or damage that may arise in connection, with the Releasors’ participation in or attendance at the Academy. If Releasors want insurance of any kind, the Releasors must obtain the Releasors own at the Releasors’ own expense. The Releasors will pay the Releasors’ own medical emergency expenses and all subsequent medical expenses in the event of any illness, accident, or injury in connection with the Academy.

This Release and Waiver is irrevocable. Accordingly, no breach by the Releasees of this Release and Waiver shall entitle the Releasors to terminate or rescind this Release and Waiver, and the Releasors hereby waive the right, in the event of any such breach, to equitable relief or to enjoin, restrain or interfere with any of the Releasees, it being understood that the Releasors shall have no right whatsoever to attempt to recover any damages with respect to any such breach.

This is a joint and several obligation of the parties hereto. Each of the Releasors has carefully read this Release and Waiver and understands the contents of it. This Release and Waiver of Liability extends to all actions by the Releasees and is intended to be as broad and inclusive as is permitted by the laws of the State of New Jersey and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. To the extent any portion of this Release is determined to be invalid, any claims that may be asserted shall be submitted to binding arbitration through the American Arbitration Association and such arbitration shall be conducted in Camden County, NJ.

In the event of a medical emergency, I authorize Camden Health & Athletic Association and their designees to bring my child, to a medical facility and I give those doctors my permission to take any steps they deem necessary.

Name of Minor Participating in the Academy*

Print Parent Name*

Signature of Parent*

Date*

*Required information must be provided.



Camden Health & Athletic Association

Sheridan Pavilion
3 Cooper Plaza, Suite 500
Camden, NJ 08103

CHAA@cooperhealth.edu
ph: 856.583.2160

2019 Summer Golf Academy (Academy)

HEALTH HISTORY:

Does the camper currently have any allergies or history of concussions? List all that apply: _____

Please provide any information about current physical, mental or psychological conditions that may affect the camper's ability to fully participate in the program: _____

Has the camper been hospitalized within the past 5 years? ____ No ____ Yes If yes, please describe: _____

Is the camper currently taking any medications (prescription and over-the counter): ____ No ____ Yes If yes, please list the drug(s) and dosage: _____

In accordance with N.J.A.C. 8:25-5.3(h), CHAA will not administer medications of any type (prescription or over-the-counter) to camp participants of any age. CHAA will not be held responsible for housing/storing medication(s). Parent(s)/Legal Guardian(s) and camp participants will be held responsible for administering and housing/storing medication(s) in a discrete place during camp. We strongly recommend Parent(s)/Legal Guardian(s) of camp participants that have been prescribed medication(s) that are self-administered to treat potentially life-threatening conditions (i.e. inhalers, EpiPen) advise CHAA during check-in to discuss their use.

IMMUNIZATION HISTORY: All CHAA Camp participants are required to provide copies of immunization records from a physician's office or a valid medical and/or religious exemption from immunization. All campers must provide records that satisfy the immunization schedule set forth at Immunization of Pupils in School, N.J.A.C. 8:57-4 or provide an official letter from a physician indicating that immunization is in progress. Your camper WILL NOT be allowed to participate without the appropriate medical records.

New Jersey Youth Camp Standards require campers to be immunized with the vaccinations required for school attendance as appropriate for the camper's age, according to the immunization schedule found in N.J.A.C. 8:57-4. An immunization schedule can be found at <http://nj.gov/health/cd/documents/k12-parents.pdf>. Campers who do not comply with this schedule will not be allowed to participate in camp.

I am the legal parent/guardian of the above named participant. I hereby certify that to the best of my knowledge, the information requested is complete and correct.

Parent/Guardian Signature: _____ Date: ____/____/____

Parent/Guardian Name: _____

***Parent/Guardian Completing Health Form** _____

***Signature Parent/Guardian Completing Waiver Form** _____



Camden Health & Athletic Association

Sheridan Pavilion
3 Cooper Plaza, Suite 500
Camden, NJ 08103

CHAA@cooperhealth.edu
ph: 856.583.2160

CHAA PHOTO RELEASE FORM

2019 SUMMER GOLF ACADEMY

July 8, 2019 – August 14, 2019

I, _____* (or we, as the case may be), and _____ as, parent(s) or legal guardian(s) (collectively, the "Guardian") of _____* (the "Minor(s)"), the Minor consent to the Minor appearing and/or participating in video or photographs (collectively "Recording") taken of him/her by someone selected or authorized from the Summer Golf Academy and or Camden Health and Athletic Association (CHAA). I grant permission for any Recording, to be used by the Summer Golf Academy and/or CHAA for marketing and public relations and other similar purposes through electronic or traditional paper media.

This photograph/video release shall remain effective for a period of twenty-five (25) years. This agreement fully represents all terms and considerations; no other inducements, statements or promises have been made to me. By signing below, I understand that the Camden Health & Athletic Association shall own any Recording or other marketing or public relations material. I am not entitled to any compensation or royalties or other remuneration resulting from such Recording, media, marketing or public relations material. I further understand I will not have the option to review the final Recording, media, public relations material or news article before it is published or broadcast and that other news media may reprint or rebroadcast the information I am releasing following the initial publication or broadcast.

Print Minor Name

Print Parent Name

Signature of Parent

Date