



NOTRE DAME WOMEN'S BASKETBALL

HS Team Camp - June 28-30, 2019

REGISTRATION

Thank you for inquiring about our Notre Dame WBB Team Camp!

Camp will be held June 28-30, 2019, on the campus of the University of Notre Dame. All courts are air-conditioned and within walking distance of one another. This is a great chance for quality competition and team building!

Check-in will start at approximately Noon on Friday, June 28th and camp will end around noon on Sunday, June 30. An exact schedule will be sent closer to camp weekend. Each team is guaranteed 6 games throughout the weekend. In addition, varsity level teams will participate in the Sudden Death Tournament on Saturday afternoon. The Notre Dame coaching staff will be present throughout the weekend and available for X and O sessions with coaching staffs.

Camp Tuition:

Boarder - includes 6 meals and on-campus housing

Camper - \$325

Coach/Staff - \$180 (above the two complimentary as allowed per team)

Commuter - includes 4 meals

Camper - \$260

Coach/Staff - \$105 (above the two complimentary as allowed per team)

**figures above include ALL on-line registration fees*

Each team is allowed up to two coaches/staff members at no charge. Any coach/staff/guest above two will be charged the applicable rate as noted above. Reminder that all boarding teams **MUST** have at least one female (age 21 or over) who will reside in the residence hall with the team. Coaches are responsible for supervision of their teams at ALL times.

A \$200 camp payment will be made to the head coach for EACH team that attends camp. This payment will be mailed to the head coach at the conclusion of camp.



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To Register:

Each team is required to return pages 3 and 4 of this packet along with the \$100 deposit check payable to the Notre Dame WBB Camp to:

Notre Dame WBB
Attn: Team Camp Registration
113 Joyce Center
Notre Dame, IN 46556

Deposits will be accepted first-come, first-serve. The deposit check and form will reserve your space for team camp. **If you have more than one team attending team camp (a.k.a. varsity and junior varsity), each team needs a separate deposit check and form.** Space is limited, especially if needing on-campus housing. No space will be held without the team deposit form and deposit check.

These checks will be returned to the head coach the last day of camp. If you cancel your team reservation after 5 pm ET on May 17, 2019, or your team leaves before the last scheduled game, the \$100 deposit will not be refunded.

Upon receipt of this form, the registration links will be sent via email to the team contact. The team contact will set up the team page and then players will be able to log on and complete their registration profiles and submit payment. If preferred, the camper can complete the paper form (pages 6-7 of this packet) and submit payment via mail or over phone. If coach/school is submitting full payment, arrangements for this can be made with the ND Summer Camp Office (574-631-8788 or ndcamps@nd.edu). Player profile pages will still need to be completed on-line or via paper form.

All special requests for scheduling (opponents, timing, etc.) must be submitted in writing with the deposit information. While we do our best to accommodate these requests, they are not guaranteed.



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SCHOOL INFORMATION

HIGH SCHOOL TEAM NAME _____

STATE _____ DIVISION IN STATE _____

CONFERENCE AFFILIATION _____

HEAD COACH NAME _____

HEAD COACH E-MAIL _____

HEAD COACH CELL PHONE (_____) _____

HEAD COACH SUMMER ADDRESS _____

TEAM CONTACT

(If different than Head Coach; this is who ALL camp correspondence will be sent to, including camper registration link. Leave this area blank if Head Coach is handling correspondence.)

NAME _____ PHONE (_____) _____

E-MAIL _____

TEAM INFORMATION - if more than 1 team coming from program, please complete separate form for each team.

Level of Team (select one) Varsity _____ Junior Varsity _____

Team Rankings 1-5 (5 being best) _____ Staying on Campus Yes _____ No _____

**For game scheduling purposes*

**Housing on campus is limited to first 25 teams*

Housing Teams Only:

of female spots (staff/players) needed in dorm _____

of male spots (staff) needed in dorm _____

A rooming list is included so roommate preferences can be submitted.



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BACKGROUND CHECK INFORMATION

Anyone attending in a coach and/or supervisory role MUST clear a background check per University policy. These checks will be administered and paid for by Notre Dame. Please list all adults that will attend camp with your team in a coach/supervisor role. Should you add/change staff, it is the head coach's responsibility to contact our office with the new information. All individuals below will be contacted by our camp office with information on how to complete background check. No coach/supervisor will be allowed to work camp without a clear background check (administered by Notre Dame) on file with our camp office before the start of camp. Clearance can take up to 21 days to process.

Team Name _____

First Name:	Last Name:
Email:	Position with Team (Circle One): Head Coach Assistant Coach Team Mom Other _____

First Name:	Last Name:
Email:	Position with Team (Circle One): Head Coach Assistant Coach Team Mom Other _____

First Name:	Last Name:
Email:	Position with Team (Circle One): Head Coach Assistant Coach Team Mom Other _____

****Please copy this sheet if more spaces are needed****



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TEAM ROSTER/HOUSING INFORMATION (DUE NO LATER THAN May 31st)

All Coaches and Players should be listed on this form so that we can cross check for registration/rooming needs.

Team Name _____

Room	Last Name	First Name	Male or Female?	Please Circle Team Role:
1			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
2			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
3			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
4			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
5			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
6			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
7			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
8			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
9			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
10			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
11			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER
12			M / F	COACH STAFF CAMPER
			M / F	COACH STAFF CAMPER



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Camper Application (on-line form available if preferred)

Team Affiliation:	Coach Name:
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Camper Last Name:		Camper First Name:		Camper Middle Initial:
Street Address:		City:	State:	Zip Code:
School Attending in Fall 2019:		Grade (Fall '19):	Email:	
Height:	Weight:	Shirt Size (Circle):		
		AS AM AL AXL AXXL		

Emergency Contact Name:	Phone Number:	Alternate Phone:
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Health Information - *to be completed by camper's parent or legal guardian*

Physical Restrictions	
Operations/Injuries	
Chronic or recurring illnesses	
Current Medications	
Date of Last Tetanus Immunization	
Allergies to Drugs/Foods	

Please submit any other medical documentation that is needed to describe health history for medical staff.



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Physician's Name/Telephone	
Dentist Name/Telephone	
Name of Insurance	
Policy Holder Name and Phone	
Telephone Number for Claims	
Contract Number/Group Number	
Policy Holder Employer	
Employer Phone Number	

Payment Information *(if paying by check, please make out to Notre Dame WBB Camp)*

Circle One: Boarder Fee \$325 or Commuter Fee \$260	
Card #	Exp. Date
Cardholder Name	
Signature	
Contact Phone	
Billing Address	