New York Ski Educational Foundation

www.nysef.org

NYSEF at Whiteface Mountain PO Box 300 Wilmington, NY 12997 518.946.7001 NYSEF at Gore Mountain PO Box 200 North Creek, NY 12853 518.251.2825



Hello athletes and parents! This summer, we are once again offering a great summer camp experience for your athlete. Below you will find details for the <u>2017 NYSEF Day Sessions at the Lake Placid Water Ramps</u> to be held this summer from June 2nd – September 4th. Since 1980, NYSEF has offered annual summer training opportunities at various locations, and we are thrilled to offer this experience at an affordable rate.

- **Philosophy**: Gain mileage and experience through water ramping, and trampoline training. Develop technical skills and introduce tactical strategies needed in SS, BA, MO, and DM in age-appropriate environments.
- Location: Lake Placid, NY.
- **Cost:** Cost includes coaching fees, and facility usage fees.
 - \circ \$60 per day
 - \$350 6 day package
 - \$525 10 day package
 - 1000 20 day package *Bestdeal*
- <u>Costs NOT included</u>: Lunch, or souvenirs.
- <u>Staff:</u> Some of your favorite NYSEF and Northwood School coaches including Justin Perry, Andris Blumbergs, Hannah Doan, Jake Doan, Nick Arnold, Mike Lynn, and Bob Witt.
- <u>Other activities:</u> Off-hill activities include video analysis, group dryland including games, hikes and ski specific workouts and other activities TBD.



Freeski athletes at a day of water ramp training



NYSEF athlete Tucker learning a front flip

More pictures can be found on the NYSEF Snowsports Facebook Page







What to Bring?

- Skis, or snowboard (<u>older</u> equipment is strongly recommended)
- Helmet
- Mouth guard (recommended)
- Life Jacket
- Ski, or snowboard boots
- Bathing suit & towel
- Dry set of Summer workout clothing
- Running shoes/sneakers
- Wetsuit or Dry suit ***(strongly recommended for beginning and end of Summer training season)
- Sunglasses and sunscreen
- Water bottle and backpack
- Lunch
- Watch (or some way to tell time!)
- Spending money (optional)
- Positive attitude!

Typical Daily Schedule

- 8:00 Athlete Drop off
- 8:10 Daily warm up
- 8:30 Trampoline session #1
- 9:30 Water ramp session #1
- 11:30 Lunch
- 12:00 Video review
- 12:30 Game/Activity
- 1:00 Trampoline session #2
- 2:00 Water ramp session #2
- 4:00 Video review
- 4:30 Daily cool down
- 4:45 Athlete pick up

The deadline and payment schedule is as follows:

- <u>At the time of a sign up</u>: A minimum, non-refundable deposit of 50% must be made payable to NYSEF
- <u>72hrs prior to first attended day session</u>: Final payment must be in at least 72hrs prior to first attended day session - payable to NYSEF. Additional Forms (found below) are also required with Final Payment
 - Completed "<u>NYSEF Camp Liability Release</u>" (below)
 - Completed "ORDA Liability Waiver" (below)
 - Copy of health insurance card
 - A <u>Current</u> USSA or USASA number must be listed (below)

Please send documents and payment to NYSEF office at Whiteface:

- Mail: NYSEF (attn "Summer Day Sessions"), PO Box 300, Wilmington, NY 12997
- Scan and email to: <u>freeridecamps@nysef.org</u>
- Call with questions (518-418-9281, or 518-946-7001 x22) or email justinp@nysef.org.
- Call Lynn (x24) to pay by phone.

Information is subject to change – please visit <u>www.nysef.org</u> for updates. Thank you for choosing NYSEF!





WHITEFACE LAKE PLACID



NEW YORK SKI EDUCATIONAL FOUNDATION CAMP LIABILITY RELEASE

<i>NYSEF</i>

TRAINING OPORTUNITY:				
PARTICIPANT NAME: USSA or USASA#:				
HOME ADDRESS: PARTICIPANT E-MAIL:				
PARTICIPANT E-MAIL:		MOB	ILE PHONE #	
	E-MAIL:		PHONE#: _	
FATHER:	E-MAIL:		PHONE#:	
EMERGENCY CONTACT (if parents cannot b	e reached):		_ #
	PART	ICIPANT INFORM	ATION	
DOB: AG	E at camp:	Weight:	Height:	
Insurance Carrier: Policy/Group #				
List any allergies the partici				
List any medications the pa				
Does the participant have a If so, please describe (also	ny medical history	that would affect h	is/her participatic	
Date of Last Tetanus Shot: I verify that the participant h		exam in the last ye	ar (please initial)	:
<u>Participants</u>	MUST provide a	copy of insurance	e card in case of	femergency!!!
	<u>LI/</u>	ABILITY RELEAS	<u>SE:</u>	
NYSEF, it's members, employees, coaliability, injury, loss or damage arising In addition, I the parent/gua for my son/daughter in case of injury i	aches, trainers, organizers from my son's/daughter's rdian, give the Camp pers ncluding but not limited to	s and agents and any othe participation in or presen- connel permission and aut performing any diagnostic	er persons connected w ce at the Camp. hority to obtain medica c procedure, operation,	reby wave, release and hold harmless vith the Camp, from any and all claim for l aid, cure and treatment or anesthetic or curative remedial procedure they of injury and medical attention becomes

necessary. I give my permission for my child to travel with NYSEF personnel inside of and outside of the United States. I am fully aware of and accept the risks and dangers inherent in snowsports and agree that I am responsible for my safety and that of my children. I assume all risks connected with participation in the Camp.

Participant's Signature

Parent/Guardian's Signature***

Date

Date

*** This is to certify that as the parent/guardian of the above named participant, all the information above is correct and I do consent to his/her agreement to be bound to the terms and conditions set forth in this waiver (including the NYSEF Code of Conduct).

NEW YORK SKI EDUCATIONAL FOUNDATION

ATHLETE CODE OF CONDUCT



As a participant in a NYSEF program or camp, the athlete must realize that they are a visible representative of NYSEF, the school they attend and their family. All athletes participating in a NYSEF program or camp will be required to follow this established Code of Conduct.

- 1. All participants are expected to abide by the Rules and Regulations at their particular venue. Remember you are a guest at that facility and should treat all venue employees and public skiers with courtesy and respect.
- 2. Participants are expected to act under all applicable laws, rules and regulations
- 3. Participants are required to wear helmets while skiing or training.
- 4. Participants are required to conduct themselves in a sportsmanlike manner at all times and to treat their team mates with sportsmanship and respect.
- 5. Participants must be neatly and properly dressed.
- 6. Participants must listen to and be courteous to coaches.
- 7. Participants must be on time for all activities.
- 8. Participants must maintain their athletic eligibility by meeting academic standards.
- 9. Participants must be under the supervision of NYSEF staff while training or competing.
- 10. Participants must abide by the NYSEF Bullying Prevention Policy Guidelines
- 11. Participants in NYSEF programs or camps will be disciplined for the following infractions:
 - a. Use of tobacco and chewing tobacco
 - b. Use and/or possession of alcohol
 - c. Use and/or possession of narcotics, non-prescription drugs or any other illegal substance
 - d. Behavior that is detrimental to the program and/or other athletes
 - e. Theft of property
- 12. Recommended disciplinary actions can include:
 - a. Dismissal from camp/event at cost of athlete/parent
 - b. Suspension of training privilege for specific time period
 - c. Loss of racing privilege for specific events (if applicable)
 - d. Police involvement
- 13. Athletes who are dismissed from a school or team because of any of the above infractions will have training privileges suspended. Participants at a camp and/or race will be sent home immediately. Program privileges will be suspended until the situation is resolved. The Program Director reserves the right to remove the training pass from a participant if the situation warrants it.
- 14. Other disciplinary measures can be taken by the Program Director based on the severity of the situation.



RESPONSIBILITIES OF USER AND WAIVER

IN CONSIDERATION of permission granted to me by the NYS Olympic Regional Development Authority("ORDA") to use the following facilities; Whiteface Mountain and facilities, Olympic Sports Complex and facilities, MacKenzie-Intervale Ski Jumping Complex and facilities, Olympic Center, Sheffield Speed Skating Oval, Lake Placid Conference Center and facilities, Gore Mountain and facilities, Bellearye Mountain and facilities, and U.S. Olympic Training Center and facilities and equipment and other locations on which ORDA may maintain and manage operations including but not limited to: bobsleds, luge sleds, skeleton sleds, trampolines, euro bungee, climbing wall, skis and snowboards (with appropriate boots) and ski poles, rental equipment (including but not limited to; skis, boots, poles, snowboards, and helmets), children's sleds, tubes for sliding, ice skates, hockey sticks, helmets, rifles, curling stones, mountain bikes, disc golf equipment, all beach related activities and rental equipment, horses and horseback riding equipment, rides in or on ORDA vehicles and or equipment, and all inflatable equipment (collectively referred to as the "Sport Facilities and Equipment") in Lake Placid, Town of North Elba, Wilmington, North Creek, Town of Johnsburg, Highmount, Town of Shandaken and Village of Pine Hill all in New York State or any other location where such equipment may be utilized.

I expressly acknowledge:

- USE OF THE SPORTS FACILITIES AND EQUIPMENT IS A HAZARDOUS ACTIVITY WHICH COULD RESULT IN PERSONAL INJURY OR DAMAGE. I acknowledge that use of the Sports Facilities and Equipment is dangerous and I knowingly assume all risks of personal injury or damage I may suffer by using the Sports Facilities and equipment. I further acknowledge that since I am using the Sports Facilities at my own risk, the ORDA bears no responsibility of any nature for any personal injury, damage or loss to my person or property arising out of or resulting from my visit to the Sports Facilities and Equipment use.
- 2. I am physically fit and possess the physical strength to meet my responsibilities as a user of the Sports Facilities and Equipment. I do not suffer from any medical condition that will be affected by my use of the Sports Facilities and Equipment. Further, I will not use the Sports Facilities and Equipment while under the influence of alcohol and/or drugs.
- 3. I agree to observe, read and abide by any and all notices as may be posted by the NYS Olympic Regional Development Authority which may pertain to my responsibilities as a user of the Sports Facilities and Equipment.
- 4. I grant permission to the ORDA to utilize any photograph, videotape, motion picture, recording or other record of my use of the Sports Facilities for any business purpose.
- 5. I acknowledge that the use of the Sports Facilities and Equipment is a hazardous activity and that I could suffer personal injury, which may be serious, as a user.
- 6. I hereby expressly acknowledge my understanding and acceptance of the foregoing, and agree to assume all the risks of any personal injuries whatsoever which I may incur during my use of the Sports Facilities and Equipment on the following date (or dates):
- 7. This agreement is governed by the applicable laws of New York State. If any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect. I agree and understand that any claim or lawsuit against the RELEASEES may be brought in the federal or state courts of New York in the county where the activity(s) takes place.

I DO FURTHER WAIVE any claim for damages which I may or might have by reason of injuries sustained by me in such use of the Sports Facilities, and do hereby release and forever discharge the ORDA, the Towns of North Elba, Wilmington, North Creek, Johnsburg, Shandaken and Highmount, the Villages of Lake Placid and Pine Hill, the State of New York, any sponsors and the officers and employees thereof, from any claim for damages against them or any of them which I may or might have by reason of injuries sustained in the use of the Sports Facilities and Equipment, or for any other damages sustained in the use thereof.

	Printed Name: First	Printed Name: Last	D.O.B	ATHLETE/PARTICIPANT SIGNATURE	Date(s) of use			
#	Printed Name: First	Printed Name: Last	D.O.B	FAMILY MEMBER UNDER 18 YEARS OF AGE ATHLETE/PARTICIPANT SIGNATURE (Parent or Legal Guardian must sign at the bottom of this page)	Date(s) of use			
1								
2								
3								
4								
STI	REET ADDRESS or PO BO2	X:		CITY:	<u>.</u>			
STATE/PROVINCE:COUNTRY:				ZIP/POSTAL CODE:	<u>.</u>			
EMAIL ADDRESS:				DATE OF BIRTH:	mm/dd/yy			
	NATURE OF PARENT OR hlete(s)/participant(s) is/are under 18 yea			DATE:	mm/dd/yy			
PRINTED NAME OF PARENT OR GUARDIAN:								
EMERGENCY CONTACT:			EMER	EMERGENCY PHONE NUMBER: ()				

The NYS Olympic Regional Development Authority may occasionally send you information and/or offers from our Olympic Venues and associated sponsors via email. At no time will your information be shared with others. Please check here if you do not wish to be added to our list: ______