

New York Ski Educational Foundation

www.nysef.org

NYSEF at Whiteface Mountain
PO Box 300
Wilmington, NY 12997



NYSEF at Ski Jumps
52 Ski Jump Lane
Lake Placid, NY 12946

Hello athletes and parents! This summer, we are once again offering great training opportunities for your athlete. Below are the details for the **2018 Grasshopper Camps** to be held this summer in Lake Placid, NY. Since 1980, NYSEF has offered annual summer training opportunities at our venue.

- **Philosophy**
 - Grasshopper camps are for athletes ages 6-14 training on the K20. We will focus on both off hill and on hill skills and techniques to keep athletes engaged in the sport during the summer months. Each camp will feature an off hill activity on Saturday afternoon and a fun competition Sunday morning.
- **Dates**
 - June 29th-July 1st, July 13th-15th, Aug. 3rd-5th, Aug. 17th-19th, Aug. 31st-Sept. 1st
- **Location**
 - Top of the ski jumps - 52 Ski Jump Ln, Lake Placid, NY
 - Olympic Training Center - 196 Old Military Rd, Lake Placid, NY
- **Accommodations**
 - This is a day camp and accommodations must be arranged by parents. Lunch will be provided on Saturday.
- **Staff**
 - NYSEF Coaches Colin Delaney and Jay Rand, along with other USSA level 100 coaches.
- **Equipment**
 - Athletes not enrolled in a NYSEF summer jumping program are expected to bring their own equipment. Accommodations can be made to provide equipment with a rental fee for the camp. Athletes must arrive before 12:30 during registration Friday, and equipment is available on a first come first served basis.
- **Cost**
 - \$175/athlete
 - \$30 equipment fee



Grasshopper & Devo athletes following Camp



NYSEF athlete Trey Frantz in action on the K20

What to Bring

- Jump equipment
 - Suit
 - Boots
 - Helmet
 - Goggles
 - Skis
- Training clothes
 - Running shoes
 - Light, athletic clothing
 - Rain Jacket (if applicable)
 - Other activities may require additional clothing. We will send word of what is recommended 1 week before the camp start.
- POSITIVE ATTITUDE

Typical Daily Schedule

- Friday
 - 12-1pm - Registration
 - 1pm - Warm-up
 - 2pm - 3:30pm - K20 jumping
 - 3:30pm - Video Review
 - 4:00pm Pick-Up
- Saturday
 - 9am - Warm-up at Olympic Training Center
 - 10-11:30am - K20 Jumping
 - 12pm - Lunch at OTC
 - 1pm - K20 Jumping
 - 2pm - Afternoon activity (biking, hiking, trampoline, etc. Details will be announced 1 week prior to camp)
 - 5pm - Pick-up at Ski Jumps
- Sunday
 - 9am - Warm-up at Jumps
 - 10am - K20 Jumping + Competition
 - 11:30am - 2km Running Race
 - 12pm - Awards and camp end

The deadline and payment schedule is as follows:

- Payment in full due 2 weeks prior to camp start
- PLUS: the following paperwork:
 - Completed “NYSEF Camp Liability Release”(below)
 - Completed “ORDA Waiver” (below)
 - Completed “OTC Waiver”
 - Completed “OTC Bio Form”
 - Copy of health insurance card
- Please send documents and payment to NYSEF office at Whiteface:
 - Mail: NYSEF (attn “Grasshopper Camp”), PO Box 300, Wilmington, NY 12997
 - Scan and email to jumpcamps@nysef.org. Call Colin with questions (518-524-2115) or email jumpcamps@nysef.org .
- Call NYSEF Offices (518-946-7001) to pay by phone.

**NEW YORK SKI EDUCATIONAL FOUNDATION
CAMP LIABILITY RELEASE**



CAMPS: _____ Camp Date

PARTICIPANT NAME: _____

HOME ADDRESS:

PARTICIPANT E-MAIL: _____ MOBILE PHONE # _____

MOTHER: _____ E-MAIL: _____ PHONE#: _____

FATHER: _____ E-MAIL: _____ PHONE#: _____

EMERGENCY CONTACT (if parents cannot be reached): _____

\# _____

PARTICIPANT INFORMATION

DOB: _____ AGE at camp: _____ Weight: _____ Height: _____

Insurance Carrier: _____

Policy/Group# _____

List any allergies the participant has:

List any medications the participant is currently taking:

Does the participant have any medical history that would affect his/her participation in this camp?
_____ If so, please describe (also list anything that would be important to know while
caring for the participant): _____

Date of Last Tetanus Shot: _____

I verify that the participant has had a physical exam in the last year (please initial): _____

Participants MUST provide a copy of insurance card in case of emergency!!!

LIABILITY RELEASE:

In consideration for the services provided by the New York Ski Educational Foundation (NYSEF), I hereby waive, release and hold harmless NYSEF, its members, employees, coaches, trainers, organizers and agents and any other persons connected with the Camp, from any and all claim for liability, injury, loss or damage arising from my son's/daughter's participation in or presence at the Camp. In addition, I the parent/guardian, give the Camp personnel permission and authority to obtain medical aid, cure and treatment or anesthetic for my son/daughter in case of injury including but not limited to performing any diagnostic procedure, operation, or curative remedial procedure they deem necessary or advisable. It is understood and agreed that every effort will be made to contact me in case 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, Belleayre 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:

1. 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					

STREET ADDRESS or PO BOX: _____ **CITY:** _____

STATE/PROVINCE: _____ **COUNTRY:** _____ **ZIP/POSTAL CODE:** _____

EMAIL ADDRESS: _____ **DATE OF BIRTH:** _____ mm/dd/yy

SIGNATURE OF PARENT OR LEGAL GUARDIAN: _____ **DATE:** _____ mm/dd/yy
(If athlete(s)/participant(s) is/are under 18 years of age)

PRINTED NAME OF PARENT OR GUARDIAN: _____

EMERGENCY CONTACT: _____ **EMERGENCY PHONE NUMBER:** () _____