

REQUEST FOR ATHLETIC CAMP

This request for authorization serves to specify your needs and to notify departments and staff members of your requirements. Please provide information and **submit electronically with the Athletic Camps Profit & Loss Projections Spreadsheet to athleticcamps@louisiana.edu**. **Please also note that you will be required to follow and strictly adhere to the UL Lafayette Athletics Camps Manual.**

No facilities or services can be reserved, nor may a camp or event take place, prior to the completion and approval of this Request for Athletic Camp. **Do not advertise for a camp referencing the University or its facilities until you have received confirmation of the approved Request for Athletic Camp via University DocuSign completion email.**

Application Date: _____ Sport: _____ Head Coach: _____

Camp Administrator: _____

Phone: _____ E-mail: _____

CAMP INFORMATION

Please complete the requested information for each camp you are requesting at this time:

	Camp 1	Camp 2	Camp 3	Camp 4
Type or Name of Camp				
Dates				
Time(s)				
Location				
Registration Fee				
Estimated Number of Participants				
Age of Participants				
Proposed Profit/Loss Option1/Option2/Option3 Example:5000/4000/1000				

Meals

Will meals be served to participants? ☐ Yes (If Yes, how many? _____) ☐ No

Will meals be served to camp workers? ☐ Yes (If Yes, how many? _____) ☐ No

****Camp administrators or their delegates must submit meal Pre-Approvals/purchases/expense in accordance with the Office of Purchasing. See UL Lafayette Athletic Camp Manual for more details.****

Housing

Will this be an overnight camp? Securing housing must be done at least 2 months prior to camp. Reserving blocks of rooms off-campus will necessitate an agreement/contract which requires execution by the Office of Purchasing and the VP Administration & Finance.

☐ Yes, on-campus housing ☐ Yes, off-campus housing ☐ No

Insurance

All athletic camps must provide insurance for the participants through the University. See **Athletic Camps Profit & Loss Projections Spreadsheet form** for more details. Each participant is charged \$.80per day they attend the specific camp.

Athletic Trainer

All athletic camps are required to have one or more athletic trainer on staff during the entire camp/clinic session for safety of the participants. See **Athletic Camps Profit & Loss Projections Spreadsheet** for more details.

Administrative Fee

University run athletic camps are assessed 10% of the GROSS REVENUES. This charge will be assessed at the end of each camp and is charged to all camps.

Food Services

Must be listed on the **Athletic Camps Profit & Loss Projections Spreadsheet** and all camp staff that will be eating during the camp must be included in the count for meals. In your estimation of meals, plan for the maximum attendees per the **Athletic Camps Profit & Loss Projections Spreadsheet**.

Revenue/ Expenses

All fees/funds will be deposited into the specified athletic team camp account. All expenses will be paid from the proceeds of this account.

An Athletic Camps Profit & Loss Projections Spreadsheet must accompany this Request for Athletic Camp for each camp. Your actual expenses must not exceed your proposed expenses unless a Budget Amendment has been prepared and approved by the Athletic Director, Interim Director of Auxiliaries, VP of Administration and Finance, and the President prior to incurring expenses.

Promotional Items

T-shirts, brochures, flyers, mailouts, and advertising must be approved by the Office of Communications & Marketing. Vendor must be on the approved vendor list. NCAA Compliance and Student Union must also approve items to be advertised.

AGREEMENT

[All signatures to be completed via DocuSign.]

It is agreed that the Internal Auditor of the University of Louisiana at Lafayette shall have access to all documents which relate to all athletic camps listed above.

I have read and I understand the conditions of this Request for Athletic Camp as well as the Athletic Camps Manual and I agree to honor the terms of each.

Signature of Camp Administrator

Title and/or Position

Signature of Head Coach

Sport

Signatures of Approval:

Student Union Program Coordinator

Date

NCAA Compliance Officer

Date

Interim Director of Auxiliaries

Date

Athletic Director

Date

Athletic Camps Auxiliary-Comptroller

Date

Jerry Luke Leblanc

Date

Dr. E. Joseph Savoie, President

Date