



Thank you for registering for the adidas Tennis Camp at  
**(St. Olaf College – Northfield, MN)**

We're looking forward to seeing you at camp this summer! We hope that this camp will be an unforgettable and exciting experience for you to improve your skills and work with some of the top coaches from across the country!

Please read the packet below as this information is extremely important. Feel free to call us with any questions at 800.944.7112 or email us at [support@tenniscamper.com](mailto:support@tenniscamper.com). This packet can be downloaded at [www.TennisCamper.com](http://www.TennisCamper.com), under "Download Forms".

### Check In **ALL CAMPERS**

July 16<sup>th</sup> from 2-3 PM, at Mellby Hall. Please Note: Lunch will not be served on the 1<sup>st</sup> day of camp. All campers should arrive dressed and ready to play!

### Check Out

July 20<sup>th</sup> at 4 PM at the tennis courts. Parents are encouraged to attend the final session on the last day! Check out will occur immediately after the closing ceremony at the courts.

### Extended Day Campers

After the first day, you should plan on arriving at the tennis courts ready to play at 8:45 AM. Parents can plan to pick up their camper at 9:00 PM after the evening activity. Lunch & dinner are included.

### Day Campers

After the first day, you should arrive at the tennis courts daily at 8:45 AM. Camp ends at 4:00 PM. Lunch is included.

### Camp Address

St. Olaf College  
1520 St. Olaf Ave, Northfield, MN 55057

### Camp Phone Number

Director – Jeff Halberg: 507.786.3031  
adidas Tennis Camp Office: 800.944.7112

### Health Form

**IMPORTANT!** Campers will not be admitted to camp without this form!

adidas Tennis Camp Health Form

- Please fill out and **bring to check in on the 1<sup>st</sup> day of camp.**

### Health & Safety

We want to ensure your child a safe and positive environment during their time at camp. Drugs, alcohol and cigarettes are strictly forbidden, and will result in immediate dismissal from camp without a refund.

### Key Deposit

The School requires a **key deposit of \$60** per camper. Please bring a check made out to "adidas Tennis Camps" for \$60. The check will be returned to the camper at the end of camp after they turn in their key.

### Transportation

adidas Tennis Camps does not provide transportation from airports, train stations or bus stops.

### Payments

Final Payments are due in our office by **May 15<sup>th</sup>**. If you have a balance and would like us to charge it to your credit card, please call us at 800.944.7112.

### Cancellation Policy

Any camper who must cancel prior to camp will receive a camp credit equal to the amount of camp tuition already paid. The credit is transferable to another family member and is good for any adidas Tennis camp through next summer (agreement begins at time of purchase). Any cancellation within 5 days of the start of camp will result in a camp credit minus \$100 cancellation fee. Camp credits are not extended to campers who leave camp after the start of a session. **CASH/CREDIT CARD REFUNDS ARE NOT OFFERED UNDER ANY CIRCUMSTANCE.**

## Packing List

- Health Form
- Tennis racquet(s), tennis shoes (no black soles)
- Water jug
- Athletic Socks
- T-Shirts
- Fan
- Shorts
- Sweatshirt
- Off-Field Clothes
- Pajamas
- Bedding Linens
- Blanket/Sleeping Bag
- Pillow
- Shower Towel
- Toiletries
- Alarm Clock
- Sunscreen
- Spending Money – we recommend bringing no more than \$50
- Key Deposit Check – made out to “adidas Tennis Camps”
- Bathing Suit
- Hat

## Don't Forget to Tell Your Friends!

Space is still available so remember to tell your friends and teammates about the camp! They can register over the phone or online at [www.TennisCamper.com](http://www.TennisCamper.com).

## Spending Money and other Valuables

It is not recommended that excessive amounts of cash be brought to camp. Please remind your camper to keep any spending money in a secure place.

We also try to discourage campers from bringing electronic devices such as iPods and laptop computers. The adidas Tennis Camps are not responsible for the theft or loss of personal items.

## Directions To St. Olaf College

**From Interstate 35 (from the North or South):** Take I-35 to Hwy. 19 East (Exit 69, Northfield exit). Travel east on Hwy. 19 for approximately 6 miles into the Northfield city limits. The main entrance to the college will be on your left.

**From Highway 77 (from the North):** Follow Hwy. 77 south through Apple Valley. Leaving Apple Valley, Hwy 77 turns into Co. Rd. 23. Follow Co. Rd. 23 into Northfield; the campus will be on your right. As you enter the Northfield city limits, go right (south) on Lincoln. Turn right (west) on St. Olaf Avenue toward the St. Olaf campus.

**From US-52 (From the North or South):** Take US-52 to Hwy. 19 (in Cannon Falls) - Travel west on Hwy. 19 into Northfield, which will include several stop signs and turns. Continue west on Hwy. 19 until you reach the western edge of Northfield. The main entrance to the college will be on your right.

**Campus Map:** <http://wp.stolaf.edu/map/>

## adidas Tennis Camps Summer Camp Health Record and Release Form

Every camper must have this health record filled out for camp and brought to camp check-in. Camps held in the following states require this form to be completed and signed by a physician before your child can participate at summer camp (CT, MA, NY).

*PLEASE DO NOT MAIL AHEAD.*

Camp Attending: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First M.I.

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

Phone (Work): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

### Health History

\_\_\_\_ May Participate in all camp activities

\_\_\_\_ May participate except for \_\_\_\_\_

Does this individual have allergies? YES NO

Explain: \_\_\_\_\_

Is this individual on a special diet? YES NO

Explain: \_\_\_\_\_

Does the individual have special needs? YES NO

Explain: \_\_\_\_\_

I have examined the above camper within the past two years.

Date Examined \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Physician's Name \_\_\_\_\_

Today's Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

### Immunization History (Please List Dates)

*Copy of Immunization Record Preferable.*

DPT \_\_\_\_\_ Booster \_\_\_\_\_

DT \_\_\_\_\_

Polio OPV (Sabin) \_\_\_\_\_ Booster \_\_\_\_\_

Measles/Mumps/Rubella (MMR) #1 \_\_\_\_\_ #2 \_\_\_\_\_

Hepatitis B #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Chickenpox \_\_\_\_\_

Tetanus \_\_\_\_\_

Turberculin \_\_\_\_\_

Pneumococcal Conjugate \_\_\_\_\_

Haemophilus Influenza b (HIB) \_\_\_\_\_

### Insurance Information

Health Insurance Provider: \_\_\_\_\_

Policy/ID Number \_\_\_\_\_

Policy Holder's Name & DOB \_\_\_\_\_

Insurance Provider Contact: Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

*Please include a photocopy of your Health Insurance card for our records.*

### Parent's Authorization

This health history is correct so far as I know, and the person herein described has permission to participate in all activities except as noted. I give my child permission to be treated by emergency response personnel. I understand that every attempt will be made to contact me, or the emergency contact, before taking this action. I hereby waive and release the adidas Tennis Camps, staff, camp management and sponsors from any liability for any injury or illness incurred while at camp. I UNDERSTAND THAT THERE IS A RISK OF INJURY TO MY CHILD AS A RESULT OF CAMP ACTIVITIES, AND KNOWINGLY AND VOLUNTARILY ASSUME ALL RISK OF SUCH INJURY. I will be financially responsible for any medical attention needed during camp.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*NOTE\*\*\* All medication will be checked and kept by the trainer. All prescription medications must be in their original case/box with the legible prescription label; including inhalers. The "prescribers authorization form" must accompany all medication and requires the physician's signature in CT, MA & NY. **The Administration of Medication Form must accompany all medication for camps in CT.** This form is available for download on TennisCamper.com.