



University of Georgia Compliance Office

Non-Institutional Camp (Coach) Approval
Sports Other Than Baseball, Basketball, Football and Volleyball

To be completed by the UGA Coach:

Coach's Name: _____

Name of Camp: _____

Date of Camp: _____

Location of Camp: _____

Individual/Company Administering the Camp: _____

Does this camp take place in a dead period? Yes No

Signature

Date

To be completed by the Camp Owner:

1. Is the camp/clinic open to the public and publicized in such a manner? Yes No

2. How is this camp being publicized? Website: _____

Please attach flyers or emails.

3. Is there a charge to participate in the camp (e.g campers)? Yes No

If Yes, how much? _____

If Yes, are you providing any free or reduced admission to the camp to individuals in high school?

Yes No

4. Is the camp employing any high school students? Yes No

Signature

Date

Compliance Office Use Only: Approved Denied Initials: _____