



**NON-INSTITUTIONAL AND PRIVATE CAMP OR CLINIC  
DECLARATION FORM**

**PRE-CAMP/CLINIC POLICY:** This form must be completed and turned into Compliance at least **14 business days** prior to the start of employment at the non-institutional camp/clinic. Athletics Department staff (except Basketball), may be employed in any capacity (e.g., counselor, guest lecturer, consultant) in a non-institutional, privately owned camp or clinic, provided the camp or clinic is operated in accordance with all restrictions applicable to Division I institutional camps and clinics. In football, participation in such camps/clinics is limited to two periods of 15 consecutive days in the months of June and July or any calendar week (Sunday through Saturday) that includes days in those months (e.g., May 28-June 3). The dates of the two 15-day periods must be on file in the Compliance Office.

**PART I: TO BE COMPLETED BY THE ATHLETIC DEPARTMENT EMPLOYEE**

**Camp Name:** \_\_\_\_\_ **Camp Dates:** \_\_\_\_\_

**Camp Location:** \_\_\_\_\_

**Camp Operator:** \_\_\_\_\_

**Camp Operator Email Address (all CAPS please):** \_\_\_\_\_

**Camp Website:** \_\_\_\_\_

**Please check all that apply:**

- ☐ The camp or clinic is open to any and all entrants (limited only by number, age, grade level and/or gender). The camp or clinic may not select participants on an invitation-only basis or reserve spots for specific prospects.
- ☐ The camp or clinic is not established, sponsored or conducted by an individual or organization that provides recruiting or scouting services concerning prospects.
- ☐ The camp or clinic does not employ (even on a voluntary basis) or give free or reduced admission privileges to any high school, preparatory school or two year college athletics award winners or ULM recruits.
- ☐ The purpose of the camp or clinic is designed to improve fundamental skills through specialized instruction and is not a tryout camp devoted primarily to agility, flexibility, speed and strength tests.
- ☐ The camp or clinic does not permit or arrange for a prospect or student-athlete to operate a concession to sell items related to or associated with the camp.
- ☐ There will be no recruitment activities (e.g., recruitment presentations, highlight videos, posters).
- ☐ The cost of awards received from the camp or clinic are included in the admission fees charged to the participants of the camp or clinic.
- ☐ A representative of ULM's athletics interests is not paying any prospect's expenses to attend the sports camp or clinic.
- ☐ The camp or clinic uses only the athletic department staff member's quotations and/or pictures in its promotional materials (e.g., camp brochure, website, social media).
- ☐ **Coaches Clinic Only:** High school prospects (individuals who have started 9<sup>th</sup> grade) will not serve as demonstrators at the clinic.



NON-INSTITUTIONAL AND PRIVATE CAMP OR CLINIC  
COACHES / STAFF EMPLOYMENT REVIEW FORM

**PART II: CERTIFICATION TO BE COMPLETED BY THE ATHLETIC DEPARTMENT  
EMPLOYEE AND THE CAMP OPERATOR**

*My signature certifies that, the responses in part I are correct and complete, and that I have read and understand NCAA regulations related to non-institutional camp and clinic employment and operations.*

\_\_\_\_\_  
*Athletic Department Employee's Name (please print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Camp Operator Name (please print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**REMINDER:** This form must be completed and turned into Compliance at least 14 business days prior to the start of employment at the non-institutional the camp/clinic

*\*This form may be sent for electronic signature through JumpForward.*

**\*\*This form may also be received by Fax or Mail to:**

*Office of Compliance Services  
University of Louisiana at Monroe  
308 Warhawk Way Monroe, LA 71209  
Phone: (318) 342-5065 I Fax (318) 342-5385*

**FOR COMPLIANCE OFFICE USE ONLY**

This camp/clinic meets NCAA rules and is approved:

☐ Yes

☐ No

Coach has been sent an email notification:

☐ Yes

☐ No

\_\_\_\_\_  
*Compliance Officer Signature*

\_\_\_\_\_  
*Date*