

WEEKLY CAMP REGISTRATION



WELCOME LETTER

Greetings from IMG Academy,

Thank you for your interest in IMG Academy, the world leader in integrated academics, athletics and personal development for student-athletes.

Dedicated to helping individuals realize their true potential, IMG Academy offers innovative, comprehensive, and customized training programs. With expert instruction, a proven training methodology, professional-quality facilities and a challenging and motivating learning environment that brings together individuals of all ages and backgrounds, IMG Academy provides the ultimate foundation for future success.

The IMG Academy Difference

Coaching

From the youth stage to the professional ranks, our sport instructors have experience coaching at every level. Each sport coaching staff also includes position or technique-specific specialists who deliver expert instruction in their area of focus.

Training Methodology

To facilitate total athletic development, we offer eight Athletic and Personal Development disciplines developed over the course of 30 years: Physical Conditioning, Mental Conditioning, Nutrition, Vision Training, Leadership Training, College Planning and Placement, Athletic Body Management and Life Skills.

Specialized Training

No two athletes are the same, so no two training programs should be the same. At IMG Academy, we help you progress in the areas in which you feel you need the most improvement.

Facilities

It's been called a Sports Utopia where athletes can eat, sleep, and train. Every facility on the IMG Academy campus is designed to help athletes reach their full potential.

Global Atmosphere

Last year alone, athletes from more than 80 nations trained at IMG Academy.

Pro Athletes

For more than 30 years, IMG Academy has had a hand in building champions, and many of them train here seasonally and in between competition to maintain their peak form, including Grand Slam winners, LPGA champions, Major League MVPs, NBA All-Stars, Heisman Trophy winners, NFL MVPs, World Cup participants and more.

Weather

The Tampa Bay area averages approximately 260 days of sunshine per year.

Regardless of your age or ability, if you have a passion for improvement, IMG Academy has a program to help you... BECOME MORE.

Best wishes,

IMG Academy

WEEKLY CAMP REGISTRATION CHECKLIST

Having received this registration packet means you have successfully reserved your space at IMG Academy, and you are well on your way to joining the prestigious IMG Academy alumni list. At this point, the registration process is started but not complete. Your space is currently reserved, but you or your athletes cannot yet participate. We require the following forms to be completed in full and returned 5 weeks prior to participation. Student athletes who arrive without all forms satisfactorily completed will not be allowed to participate in their sport program until this requirement has been met. No credits or refunds will be provided. All individuals under the age of 21 are required to submit these forms, regardless of their boarding status. All forms must be completed in English. We have provided a checklist for your convenience to help organize the registration process.

Please use the following checklist as a guideline to assist you in completing all forms. All forms are required to participate in IMG Academy programs.

To Complete:

- **In order to ensure that you are completing each form correctly and in its entirety, please be sure to read through any instructions (when provided) for each form and/or section within a form before filling in you or your child's information.**
- Submit forms to the Enrollment Office at least 5 weeks prior to arrival. If you register for a program less than 5 weeks in advance, please submit the required forms with 48 hours after doing so.
- Forms may be submitted by faxing them to 941-752-2630 or by e-mailing them to acad.forms@img.com
- You may submit an electronic or hard copy of your child's completed forms. Please bring the originals to check-in.

- Student Health Record/Physician's Report**..... **Pages 1-4**
 - Only the IMG Academy Student Health Record/Physician's Report will be accepted. IMG Academy cannot accept other physical forms from doctor's offices, other school physicals or letters.
 - Physicals must be completed within a year of the reservation departure date and will only be valid for one year from the physical examination date. If the physical date expires during your child's reservation a new physical will be required prior to arrival.
 - Based upon Florida statutes, any health professional who is licensed in Florida or the state/country your child resided in at the time of the health examination and who is authorized to perform a general health examination under such licensure shall be acceptable to complete the Physician's Report.
 - Physician's Report must be signed, dated and stamped by the physician's office.
 - **If your child has a chronic medical condition such as diabetes, epilepsy, seizures, severe allergies or a mental health condition there might be special requirements that are applicable for your child to attend or board at IMG Academy. Please contact Health Services at 941-752-2479 to discuss these requirements prior to proceeding with registration at IMG Academy. In some instances the child may be required to be a non-boarding student to participate our programs.**
- Emergency Contacts**..... **Page 5**
 - Provide three contacts in the order of whom you wish us to contact in the event of an emergency.
- Consent for Treatment/Activities**..... **Pages 6-7**
- Agreement to Participate/Waiver and Indemnification**..... **Pages 8-9**
- Student Bank Form**..... **Page 10**
 - Provides you the option to set up a bank account in your child's name for spending money during their stay at IMG Academy. For additional information please refer to page 14.
- Transportation Form**..... **Page 11**
 - Provides you the option to set up transportation to and from a selected airport to IMG Academy for arrival and departure. For additional information please refer to page 13.
- GSSI Testing Information**..... **Page 21**

STUDENT HEALTH RECORDS

PLEASE NOTE: THE STUDENT HEALTH RECORDS/PHYSICIAN'S REPORT FORMS ARE DUE ANNUALLY. THIS PAGE IS TO BE COMPLETED BY THE PARENT/GUARDIAN.

First Name: _____ Last Name: _____ Date of Birth _____
MM/DD/YYYY

Gender: Male Female Housing: Boarding Non-boarding Sport: _____

Camper Allergy Information: Does student have any known allergies to food/medicine/other? No Yes (If so, please mark allergies below):

Penicillin Aspirin Peanuts Bees Eggs Dairy Soy Tree Nuts Shellfish Other: _____

What treatment or medication is to be given in the event your student has an allergic reaction?: _____

Does your child carry an Epi-Pen? No Yes (Please check-in with Health Services upon arrival to pick up an epi-pen luggage tag)

HEALTH HISTORY:

***** If your student has a chronic medical condition such as diabetes, seizure disorder, hemophilia, severe allergies or mental health disorder, there might be special requirements that are applicable for your child to attend or to board at IMG Academy. Please contact Health Services at 941-752-2479 to discuss these requirements prior to enrolling or making any travel arrangements to IMG Academy. In some instances, the child may be required to be a non-boarding student to participate in our programs.*****

01	Diabetes Type: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
02	Asthma/Bronchitis Comments: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
03	Does the student cough, wheeze, or have trouble breathing during or after activity?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
04	Epilepsy/Seizure Disorder Comments: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
05	Has the student ever had a diagnosed concussion? a. If YES, how many? _____ b. Within last 6 months, provide documentation of event and include doctor's clearance.	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
06	Has the student ever experienced unconsciousness, memory loss or had a seizure as a result of a head injury?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
07	Mononucleosis Comments: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
08	Has the student or any family member ever had an adverse reaction to anesthesia (ex. malignant hyperthermia)?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
09	Does the student have a history of or currently have an eating disorder?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10	Does the student have a history of or currently have any mental health issues (ex. depression, anxiety, stress, ADD/ADHD)? a. Does the student take medication related to a mental health issue? (ex. anti-depressant, anti-anxiety, ADD/ADHD medications)? b. If YES, what medications? _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11	Has the student ever been referred/evaluated by a psychiatrist/psychologist?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12	Pneumonia Comments: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13	Sinusitis Comments: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14	Tonsillitis Comments: _____	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15	Does the student have painful menstrual cycles? How is it treated? _____		<input type="checkbox"/> Yes	<input type="checkbox"/> No
16	Does the student have any current skin problems (ex. itching, rashes, acne, warts, fungus)?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17	Does the student have frequent or severe headaches or migraines?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18	Has the student ever had numbness or tingling in their arms, hands, legs, or feet?	Date: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19	IMMUNIZATION RECORD: Please provide a complete list of immunizations and dates that immunizations were received for the student. This record must be submitted in English.			

Explain "YES" Answers: _____

STUDENT HEALTH RECORDS

Name of Participant : _____

THIS PAGE IS TO BE COMPLETED BY THE PARENT/GUARDIAN

List any surgeries or hospitalizations:

DATE	SURGERY	HOSPITALIZATION

CURRENT MEDICATIONS:

Please list all medications and their dosages (including over-the-counter medications and supplements) that your child is taking:

MEDICATION	DOSAGE	INSTRUCTIONS

MEDICATION REQUIREMENTS:

1. For the safety of all of our students, medication is not allowed to be in a student's room.
2. No medical planners (weekly pill dispensers) are allowed.
3. All prescription medications must have an official pharmacy label attached to the bottle/package (in English) which includes the child's name, instructions, etc. -OR- must be in its original package and accompanied by a doctor's written orders for administration (in English).
 Note: Prescription medications will be dispensed according to the pharmacy label or the doctor's written orders only. Any changes to the dosage amount, frequency, etc. need to have a new doctor's written order stating how it should be given.
4. All over-the-counter medications must be in their original bottle/package (in English). A parent may include specific instructions regarding how much, how often and what time your child should take it. Otherwise, it will be dispensed when your child asks for it (as needed – and per package instructions).
5. If your child carries an Epi-Pen, we strongly recommend that an extra Epi-Pen be dropped off at Health Services at check-in. Health Services can provide your child with an Epi-Pen tag for his/her sport bag.

ORTHOPEDIC HISTORY

Please provide any previous injuries your student has suffered: Include dates, surgeries, special tests (CAT scan, x-ray, MRI, etc), right or left body part.

Head (Including ear, teeth, nose, and eyes):		Wrists:	
Neck:		Hands/Fingers:	
Back:		Thighs:	
Chest:		Knee:	
Shoulders:		Lower Leg (shin/calves):	
Arms:		Ankles:	
Elbows:		Feet/Toes:	

Is there anything else we should be aware of regarding your student's health?

I hereby state, to the best of my knowledge, my answers to the above questions are complete and correct. I understand and acknowledge that I am hereby advised that the student should undergo a cardiovascular assessment, which may include such diagnostic tests as electrocardiogram (EKG), echocardiogram (ECHO) and/or cardio stress test. If any of the above tests are performed on your student, please include a copy with this form.

_____ Signature of Parent / Guardian	_____ Date of Completion
_____ Please print name	

Name of Participant : _____

PHYSICIAN'S REPORT - MUST BE COMPLETED BY PHYSICIAN IN ENGLISH

Based upon Florida statutes, any health professional who is licensed in Florida or the state/country the student resided in at the time of the health examination and who is authorized to perform a general health examination under such licensure shall be acceptable to complete the Physician's Report. A health professional includes an individual who is a licensed M.D., D.O., Physician's Assistant/P.A., or Nurse Practitioner/ARNP.

RECENT ORTHOPEDIC HISTORY (required)

1. Has the student had any orthopedic injuries within the last six months? Yes No Date: _____
- a. If YES, please specify the injury: _____
- b. If YES, does the student have clearance to resume participation in sport in returning from the injury? Yes No

RECENT CONCUSSION HISTORY (required)

1. Has the student had a diagnosed concussion within the last six months? Yes No Date: _____
- a. If YES, does the student have clearance to resume participation in sport in returning from the concussion? Yes No Examination Date: _____

PHYSICAL EXAM

Describe any variations from the norm N = Normal Ab = Abnormal

Teeth:	Scalp:	GI System:
Glands:	Extremities:	Vital Signs:
Lungs:	Eyes:	Menses:
Skin:	Ears:	Chest X-Ray:
Heart:	Abdomen:	Other:
Abnormal explained: _____		

SCREENING TESTS

Height:	Weight:	BP:	P:
Vision Distance	Right _____ Left _____	With Correction	Wears Glasses <input type="checkbox"/> Yes <input type="checkbox"/> No
Acuity:	Right _____ Left _____	Without Correction	Wears Contacts <input type="checkbox"/> Yes <input type="checkbox"/> No

TUBERCULOSIS SCREENING (MANTOUX PPD SKIN TEST)

Have you been experiencing any of the following signs and symptoms that may be associated with tuberculosis?
 (Anyone with a "Yes" response will require a TB test or chest x-ray)

1. Persistent Cough (>3 weeks) <input type="checkbox"/> Yes <input type="checkbox"/> No	6. Night Sweats <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Coughing up Blood <input type="checkbox"/> Yes <input type="checkbox"/> No	7. Tire Easily <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Unexplained Weight Loss <input type="checkbox"/> Yes <input type="checkbox"/> No	8. Have you ever had a positive TB skin test? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Loss of Appetite <input type="checkbox"/> Yes <input type="checkbox"/> No	9. Have you ever taken prophylactic medication because you were exposed to TB? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Fever/Chills <input type="checkbox"/> Yes <input type="checkbox"/> No	

Date of Test:	Date Read:	2nd Test Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Site:	Results in MM:	Date of 2nd Test:
By:	By:	Site:
Manufacturer:		By:
Lot #:	Results in MM:	Expiration Date:

Name of Student : _____

PHYSICIAN'S REPORT - MUST BE COMPLETED BY PHYSICIAN IN ENGLISH

12 POINT CARDIAC EVALUATION

IMG Academy is dedicated to the health and safety of our athletes. For that reason we have adopted the American Heart Association's 12 Point Recommendations for Pre-Participation Screening. **Any "yes" answers need to result in: (1) ECG (2) echocardiogram (3) letter of clearance from a cardiologist to be delivered prior to student's travel to IMG.** *Personal Medical History and Family Medical History sections may be completed by a parent/guardian.*

PERSONAL MEDICAL HISTORY (Please see above for any "Yes" response)			COMMENTS
Exertional chest pain/discomfort	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Syncope/near syncope	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Excessive exertional and otherwise unexplained dyspnea/fatigue associated with exercise	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Prior recognition of heart murmur	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Elevated blood pressure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

FAMILY MEDICAL HISTORY (Please see above for any "Yes" response)			COMMENTS
Premature death (sudden or otherwise) related to heart disease in relatives younger than 50 years	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Disability from heart disease in close relative younger than 50 years	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Specific knowledge of hypertrophic or dilated cardiomyopathy, ion channelopathies such as long QT syndrome, Marfan Syndrome, or clinically important arrhythmias	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

PHYSICAL EXAMINATION (Must be completed by a health professional - Please see above for any "Yes" response)			COMMENTS
Heart murmur	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Aortic Coarctation noted on Femoral Pulse Exam	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Physical stigmata of Marfan syndrome	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Abnormal Brachial artery blood pressure (sitting position)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Notes: _____

Additional information the examiner believes should be brought to the attention of IMG Academy to enable the student to participate in athletics or to provide for student's well being: _____

I understand that IMG Academy programs may include vigorous physical activities and exertion, which can occur in a hot and humid environment, such as Bradenton, Florida. I have discussed **both page 3 and page 4**, including the "12 Point Cardiac Evaluation," with the student and parents, performed a physical examination and believe he/she is physically able to participate in athletic and sports activities as described with unrestricted clearance.

Physician's Name (Print): _____

Physician's Signature: _____

Address: _____ Date _____

City, State, Zip: _____

Phone: () _____

EMERGENCY CONTACTS

With the safety and well-being of your child in mind, we are asking that you provide three emergency contacts. We will only call the second and third person if we are unable to reach the first on the list. These three (3) contacts should be listed below in the order in which you would like them called. If the parent/legal guardian would like to be the first person called in case of an emergency, please be sure to list yourself as Emergency Contact #1. If possible, please be certain that at least one of the contacts is able to communicate in English.

Please list phone numbers below in order they should be called: If international please include country and city codes.

Emergency Contact #1

Name of Contact: _____ Relationship to student: _____

Language: _____ Country to be called: _____

English Speaker: Yes No Email: _____

1. _____ # Type: _____

2. _____ # Type: _____

3. _____ # Type: _____

(Contact Numbers) (Specify home, cell or business)

Emergency Contact #2

Name of Contact: _____ Relationship to student: _____

Language: _____ Country to be called: _____

English Speaker: Yes No Email: _____

1. _____ # Type: _____

2. _____ # Type: _____

3. _____ # Type: _____

(Contact Numbers) (Specify home, cell or business)

Emergency Contact #3

Name of Contact: _____ Relationship to student: _____

Language: _____ Country to be called: _____

English Speaker: Yes No Email: _____

1. _____ # Type: _____

2. _____ # Type: _____

3. _____ # Type: _____

(Contact Numbers) (Specify home, cell or business)

Should this contact information change, it is the responsibility of the family to notify us with these changes.

Signature of Custodial Parent: _____

Date: _____

CONSENT FOR TREATMENT

CONSENT FOR TREATMENT

This is to certify that the staff of IMG Academy is being given authority by me, the custodial parent:

_____ of _____
(Print Name of Parent or Guardian) (Print Name of Child)

or any medical/mental health care treatment (including immunizations) and prescriptions reasonably necessary or medically advisable to maintain the life, health and well-being of my child. This includes, but is not limited to, first aid care and prevention of injuries, mental health interventions, follow-up care and the taking of over-the-counter or prescription medicines that are approved by a physician even when the child is not seen by a physician. This consent for treatment extends to the signing and conduct of: (1) legal authorization for treatment; (2) consultations; (3) anesthesia; (4) emergency examinations; (5) consent for hospitalization; (6) mental health treatment, (7) treatment or surgery that may be deemed necessary by appropriate medical personnel and (8) disclosure of all medical information, electronically, orally or in print, related to any treatment.

Child's home address: _____

City: _____ State: _____ Zip/Postal Code: _____ Country: _____

Home phone #: _____ Cell #: _____
(Please include country and city codes) (Please include country and city codes)

Work phone #: _____ Email: _____
(Please include country and city codes)

List any specific medical information (i.e allergic reaction to certain drugs, medications) that a physician should be aware of when treating your child: _____

INSURANCE INFORMATION: If providing medical insurance information, **please provide a copy of front & back of insurance card.**

*Please Note: Medical fees will be charged to your credit card (listed above), if your insurance is not accepted by the medical provider.

Insurance Company: _____ Name of Policy Holder: _____

Birth Date of Policy Holder: _____ Group/Policy #: _____ Relationship to insured: _____

Insurance Company Address: _____ Insurance Company Phone Number: _____

Signature of Custodial Parent: _____ Date: _____

DRUG AND ALCOHOL TESTING AUTHORIZATION

The use of illegal drugs, controlled substances and alcohol can have a detrimental impact on behavior, interfere with academic and athletic performance, cause permanent physical and mental harm to the user and increase the risk of injury to teammates, athletic opponents and all others with whom the user interacts. Therefore, IMG Academy LLP has implemented a Drug and Alcohol Testing Policy ("Policy") that is described in the Student Handbook. All parties signing this form acknowledge that they have received, read and understand the Policy, and also understand that penalties may be imposed, including expulsion, for violating the Policy. Further, all parties signing this form agree to all of the terms, conditions and rules of the Policy.

A participant who is age 13 and older will be subject to mandatory testing during the school year. Reasonable suspicion testing may be conducted for all participants regardless of age. Each test will consist of hair analysis, urine analysis or other method adopted by IMG.

I hereby consent to having samples of my student's hair, urine or other body sample tested for the presence of drugs, alcohol or other substances covered by the Policy at such times as tests are required under the Policy. I also authorize the release of information concerning the results of such test to the Participant and IMG Academy.

PROPERTY DAMAGE

The Participant and his/her Parents/Guardians agree to and hereby authorize a charge by IMG Academy against the credit card on file whenever necessary to cover costs of any property damages caused by the Participant to his/her room or any other facility used at IMG Academy.

MEDICAL IDENTIFICATION CARD

I voluntarily wish to add the following information regarding severe allergies, chronic illnesses or other potentially life threatening medical conditions to my child's campus identification. I further consent to this information being posted on my child's student records and files, in print and electronically. I understand that this information is shared among IMG Academy employees.

OFF CAMPUS ACTIVITIES (PLEASE CHOOSE ONE BELOW):

My child has permission to participate in all off-campus supervised activities.

My child does not have permission to participate in any off-campus supervised activities.

Comments: _____

Name of Participant (Please Print): _____ Sport: _____

Signature of Participant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

(If Participant Is Under 18)

AGREEMENT TO PARTICIPATE

ASSUMPTION OF RISKS: Physical activity, by its very nature, carries with it certain dangers and risks that cannot be eliminated regardless of the great care taken to prevent or minimize harm. IMG has facilities for various sport specific activities such as soccer, golf, tennis, baseball, football and basketball and related activities such as physical training, running, cycling and swimming. Some of these activities involve endurance or strenuous exertions of strength using various muscle groups, some involve quick movements involving speed and change of direction, some involve contact with equipment, fixed objects (e.g. goal posts), other participants (including participants that are older or younger and who may be larger or smaller in terms of weight and height) and various surfaces types, and others involve sustained physical activity that places stress on the cardiovascular and nervous systems. The specific risks vary from one activity to another, but in each activity the risks range from (1) minor injuries such as cuts, bruises, muscle strains and sprains, to (2) major injuries such as broken or fractured bones, concussions, or lost teeth, to (3) catastrophic injuries, such as heart attacks or fractured skull or those that cause disfigurement, loss of mental capacity, loss of sight, speech or hearing, paralysis, or death. I also understand that the Participant may be exposed, or expose others, to contagious and potentially harmful or deadly disease such as influenza, common cold, chicken pox, meningitis, or measles. Participant will also be exposed to risks while traveling (such as in vans when traveling to and from competitions, social events, or the airport), exposure to large crowds (such as at a big competition or a music concert), and exposure to risks related to receipt of treatment for any physical or mental condition.

Participant and Parent/Guardian have read the previous paragraphs and (1) understand the nature of the activities at IMG, (2) understand the demands of those activities relative to the physical condition and skill level of Participant, and (3) appreciate the types of injuries and illnesses and risks related to treatment for any physical or medical condition which may occur as a result of activities that I participate in at IMG. Participant and Parent/Guardian hereby assert that participation in a sport program at IMG and use of their facilities and services is voluntary and that Participant and Parent/Guardian knowingly assume all related risks.

PUBLICITY RELEASE AND CONSENT: Participant and Parent/Guardian consent to all recording, photographing and filming of Participant (the "Recordings") and each agree that IMG can use these Recordings at any time and in any manner without payment to, or additional consent of, Participant or Parent/Guardian and release IMG and its licensee from all claims related to use of the Recordings.

ACKNOWLEDGEMENT OF RULES AND STANDARDS OF CONDUCT: I understand that IMG has rules and standards of conduct that are set forth in the IMG Academy Student-Athlete Handbook. I agree to abide by these rules and standards for the safety of all participants, guests and employees. Campers will be provided with a copy of the rules and standards of conduct upon check-in. Any consequences that come as a result of violating the rules and standards as defined by the Student-Athlete Handbook are at the determination of IMG Academy Campus Life. Any dismissal due to a rules and standards violation will not result in a refund.

ACKNOWLEDGMENT OF UNDERSTANDING: Participant and Parent/Guardian have read this agreement to participate and fully understand its terms. Participant and Parent/Guardian acknowledge freely and voluntarily signing the agreement to participate and intend the signatures to signify a complete assumption of the inherent risks of participating in or observing activities at IMG to the greatest extent allowed by law in the State of Florida.

Participant and Parent/Guardian have read this Agreement and fully understand its terms. In signing this Agreement each acknowledges that he or she is consenting to the Participant's participation at IMG Academy (as specified in paragraph one) and acknowledge that each of Participant and Parent/Guardian expressly assumes all inherent risks of IMG Academy activities.

Name of Participant (Please Print): _____	Sport: _____
Signature of Participant: _____	Date: _____
Signature of Parent/Guardian: _____	Date: _____

(If Participant Is Under 18)

WAIVER AND INDEMNIFICATION

NAME OF PARTICIPANT: _____ **DATE OF BIRTH:** _____
(please print)

WAIVER: In consideration for IMG Academy LLC (hereafter “IMG”) accepting the enrollment of Participant in a program and/or permitting Participant access to or the use of the property, facilities, parking lot, buildings, fields, equipment, housing, dining areas, and/or services of IMG, Participant and his/her Parent/Guardian, on behalf of Participant personally, as well as his/her heirs, next of kin, personal representatives, assigned and/or unborn child(ren), hereby waive any claims against and covenant not to sue or bring any action against IMG, its affiliated companies, or any of their members, directors, officers, employees, volunteers, sponsors, independent contractors or agents, for any claim, demand, or lawsuit whatsoever, including, but not limited to, those that arise from or relate to Participant’s own acts, the acts of third persons, the effect of the condition of any property, equipment, or premises, or any acts of IMG’s own negligence, or the negligence of any IMG officer, employee, agent, or anyone else whose conduct may be attributed to IMG. Participant and his/her Parent/Guardian agree that this waiver, release from liability, and covenant not to sue specifically includes, but is not limited to, any claims for personal injury or illness (including death) as well as damage to, or the loss or theft of, any personal property. Participant and his/her Parent/Guardian further agree that this waiver, release from liability, and covenant not to sue has legal effect throughout Participant’s enrollment in any IMG program, as well as each and every time IMG property or facilities are used by Participant, his/her guests, relatives, or family members, and agree that it shall be construed as if Participant and his/her Parent/Guardian acknowledged and attested to it throughout that time and upon each such use.

INDEMNIFICATION: In further consideration for IMG accepting the enrollment of Participant in a program and/or permitting Participant access to or the use of the property, facilities, parking lot, buildings, fields, equipment, housing, dining areas, and/or services of IMG, Participant and his/her Parent/Guardian, on behalf of Participant personally, his/her Parent/Guardian personally, as well as their personal representatives or assigns, hereby contractually agree to defend and indemnify IMG, its affiliated companies, or any of their members, directors, officers, employees, volunteers, sponsors, independent contractors, or agents, from any and all claims, demands, lawsuits, or damages, including related costs and attorney fees, brought by any other person or entity for any injuries or any damage to themselves, their property, or to Participant or his/her property, arising out of the use of any IMG service or facility by Participant and/or his/her guests, relatives or family members. This indemnification agreement specifically includes, but is not limited to, claims, demands, damages, or lawsuits brought by third parties which arise from or relate to any active or passive negligence, intentional conduct, and/or criminal conduct by Participant and/or his/her guests, relatives, or family members. This indemnification agreement is not limited to activities occurring on an IMG premises, but is intended to encompass any and all conduct by Participant and/or his/her guests, relatives, or family members for which a third party may seek to hold IMG, its affiliated companies, or any of their members, directors, officers, employees, volunteers, sponsors, independent contractors, or agents, liable, whether occurring on or off of an IMG property, and whether occurring as a result of travel, sport program practices, instruction, or training, participation in horse play, school or social activities, exposure to inclement weather, and/or any other circumstance whatsoever. Participant and his/her Parent/Guardian further agree that this indemnification agreement has legal effect throughout Participant’s enrollment in any IMG program, as well as each and every time IMG property or facilities are used by Participant, his/her guests, relatives, or family members, and agree that it shall be construed as if Participant and his/her Parent/Guardian acknowledged and attested to it throughout that time and upon each such use.

ACKNOWLEDGMENT: Participant and Parent/Guardian have read this waiver and fully understand its terms. Participant and Parent/Guardian further expressly agree that this waiver is intended to be as broad and inclusive as permitted under Florida law. If any portion is held invalid, the remaining portion of the waiver will continue in full legal force and effect.

NOTICE TO THE MINOR CHILD’S NATURAL GUARDIAN

Read this form completely and carefully. You are agreeing to let your minor child engage in a potentially dangerous activity. You are agreeing that, even if IMG uses reasonable care in providing this activity, there is a chance your child may be seriously injured or killed by participating in this activity because there are certain dangers inherent in the activity which cannot be avoided or eliminated. By signing this form you are giving up your child’s right and your right to recover from IMG in a lawsuit for any personal injury, including death, to your child or any property damage that results from the risks that are a natural party of the activity. You have the right to refuse to sign this form, and IMG has the right to refuse to let your child participate if you do not sign this form.

Participant and Parent/Guardian acknowledge that they are signing the agreement freely and voluntarily, and intend their signatures to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Participant: _____	Date: _____
Signature of Parent/Guardian: _____ (If Participant is Under 18)	Date: _____

STUDENT BANK FORM

Student's Name: _____
(Please Print)

Arrival date: _____ Departure Date: _____

As a service to our participants, we offer a personal spending "bank" account. Money may be deposited in this account by cash, check (drawn on a US Bank), credit card (5% service charge) or money order. Students may withdraw money on a daily basis (during posted bank hours) from this account, allowing them to carry only the money they need. They may also use this card to pay for items purchased at the IMG Sports Shop and/or Nicky B'stro and to pay for private lessons or transportation.

Based on past history, an amount of \$100 per week is adequate. Additional money may be deposited at any time. If this account becomes negative, your credit card will be charged, including any service fees. Any money remaining at the end of the stay and not withdrawn, will be returned to you in accordance with the procedures listed below.

Note: IMG Academy is not responsible for any money not deposited into this account.

(Check one of the options listed below)

Option #1 I authorize IMG Academy to charge my credit card on file for my child's personal spending account. I understand there is a non-refundable 5% service charge on all cash advance transactions. Money not used and/or withdrawn will be refunded to this credit card. If you wish to put money in your child's spending account please fill out the information below:

LAST FOUR DIGITS OF CREDIT CARD ON FILE TO BE CHARGED (In the event more than one is currently on file): _____

Personal Spending Amount: \$_____ X 5% (surcharge) = \$_____ to be charged.

IMPORTANT: If you do not have a credit card on file, it is your responsibility to call the Student Bank at 941-752-2487 and provide payment information over the phone.

Option #2 Enclosed is a check or money order made out to "IMG Academy" to be deposited into my child's personal spending account. I understand there is no fee for this service. A check will be mailed to the child's home address for money not used and/or withdrawn. Please note that the refund check cannot be made payable to a child. Please indicate to whom the refund check should be made out to in the event money needs to be refunded:

Name: _____

Option #3 I do not wish to open a personal spending account at this time and understand that I may do so at anytime, including during check-in.

Parent/Guardian's Signature: _____ Date: _____

FAX TO: 941.752.2630 IMG Academy 5500 34th St. West, Bradenton, FL 34210

EMAIL TO: campforms@imgworld.com

TRANSPORTATION FORM

Student's Name: _____ Parents Email: _____
(Please Print)

Student's Cell: _____ U.S. Contact Number: _____

Please check one of the options below. This form must be returned 72 hours prior to arrival.

Option #1 I will require transportation to and/or from the surrounding Florida airports indicated below. I have also listed the Airline, flight number, and payment information below. Change notices should be directed to transportation at 941.840.8092 or email transportation@img.com

IMG Academy Airport Pricing: (includes tip)

Airport	Rate Each Way
Sarasota-Bradenton	\$40
Tampa	\$125
Orlando - (credit card only)	\$310
Miami - (credit card only)	\$565
Unaccompanied Minor Fee	\$45

** Prices subject to change. Shared ride rates may be available. Airport rates and shared ride rates are subject to a 5% charge if requested within 72 hours of flight. No shared ride rates are available for travelers on different inbound (arriving) flights.*

Option #2 I do not need Airport Transfers at this time. I will arrange transportation at a future date through transportation@img.com, or call 941-840-8092. I understand IMG Academy will not be held responsible for any transportation needs which are not arranged in this manner.

Arrival Date: _____ **Age:** _____

Florida Airport: _____ Airline: _____ International Flight: YES NO

Flight Number: _____ Arrival Time: _____ AM PM

Departure Date: _____ **Age:** _____

Florida Airport: _____ Airline: _____ International Flight: YES NO

Flight Number: _____ Departure Time: _____ AM PM

IMPORTANT: Have you purchased an Unaccompanied Minor (UM) service thru the Airline? YES NO

If yes, it is necessary to purchase another UM service for the IMG airport transfers. The cost is an additional \$45 per person per trip. If no, you can still purchase a (UM) service for the IMG airport transfers, but we may not be able to perform the entire service. The airport and or airline may not allow the driver to go thru security if the traveler has not paid the airline for a (UM) service. If you would like to purchase the (UM) service for the IMG airport transfers and have not paid for the (UM) service thru the airline please check yes to the following statement.

I have not purchased a (UM) service thru the airline but want to purchase the service thru IMG for the airport transfers. I understand the driver may not be able to go thru security. If the driver is not allowed thru security on departures he/she will not stay for the plane to depart. On arrivals the driver will be at the closest access point outside of security. Please provide what assistance you can for (please print name) _____. The cost is \$45 per person per trip. The driver's information will be emailed to you 48 hours prior to each flight. This information must be given by you to the airline. The driver's information will probably be different for each flight.

Method of Payment:

CREDIT CARD ON FILE ENDING IN: _____ CASH TO DRIVER (except Miami & Orlando) PAID AT TIME OF REGISTRATION

FAX TO: 941.752.2630 **EMAIL TO:** transportation@img.com at least 72 hours prior to flights

Upon form completion and submission you will receive confirmation of receipt from the Office of Forms & Records via phone or e-mail. The confirmation of completed forms will finalize your registration process. Your next step is General Information to help aid in planning your stay.

GENERAL INFORMATION

Congratulations on your successful registration! The following provides information every parent and camper should know before attending IMG Academy. It is designed to equip you and your child with the knowledge to plan and prepare for a successful stay.

CHECK-IN

- All campers check-in upon arrival.

Check-in Times

Program	Student Type	Day	Time	Room Availability	Location
Weekend Camp (Sept.-May)	All	Friday	After 3:00pm	After 3:00pm	Guest Services
Weekly & Multi-Week Camp (Sept.-May)	Non-Boarding	Sunday	10:00am-6:30pm	n/a	Guest Services
Weekly & Multi-Week Camp (Sept.-May)	Boarding	Sunday	12:00-6:30pm	After 3:00pm	Guest Services
Summer Camps (June-August)	All	Sunday	1:00-5:00pm	After 2:00pm	TBD

Note: Holiday/Specialty Camps may require unique check-in days and times. Please contact your Sport Advisor to confirm the check-in date and time.

- **Groups** - Check-in will be based on travel schedule. Please refer to the transportation section on page 13 for transportation assistance to and from the airport. For additional group check-in needs, you may email guestrelations@imgworld.com.
- **Late and early arrivals due to travel will be accommodated as needed.**
- **Schedule** - Each camper will receive their sport program schedule and Academy map at check-in.
- **Important Documents** - Plane tickets, passport, student bank money and important documents must be handed in during check-in for safe-keeping during the camper's stay.
- **Room Assignments** - Boarding campers will be assigned a room and shown to their room by Campus Life at the conclusion of the check-in process. **Please see the check-in chart for room availability times.**
- **Orientation** - Boarding campers attend a campus orientation after dinner on Sunday evening. At that time, all rules and regulations are covered. Sports programs will hold an orientation either Sunday evening or prior to beginning the program on Monday. Orientation information will be provided at check-in.

CHECK-OUT

- **For Weekly and Multi-Week Programs - Check-out is on Saturday by 11:00am.** All boarding campers must check-out of their dorms by this time, unless they are continuing into the following week's program.
- **For Weekend Programs** - Check-out is on Sunday at the conclusion of your sport program.
- **Non-Boarding Campers** - Campers who do not board will automatically be checked-out of their reservation at the conclusion of their program.
- **Room Verification** - Boarding campers first check-out with Campus Life who will walk through the room with your child to ensure he or she is fully packed and verify the room is in the same condition as upon arrival. Campers may be asked to clean their room to avoid a room cleaning fee or may be charged for room damage.
- **Exit Pass** -Campus Life staff will write an exit pass for your child upon a successful room verification. Campers will present their exit pass to Guest Services who will complete their final check-out.
- **Bag Storage** -Campers may store bags and materials at a designated area until their departure time.

TRANSPORTATION

- **Transportation Requests** - Transportation to and from a selected airport or bus depot may be arranged through the Academy. Please make all travel arrangements at least 72 hours in advance by e-mail, phone or fax confirmation. For your convenience, a Transportation Form is provided with this packet on page 11. Please contact the Transportation Department for additional information. Prices are subject to change without notice.

Transportation Department

Phone: 941.840.8092

Fax: 941.752.2630

E-mail: transportation@imgworld.com

- **Sarasota/Bradenton Airport**- Transportation is \$35*
- **Tampa International Airport**- Transportation is \$110*
- **Orlando International Airport**- Transportation is \$275*
*Multi-person rates may be available. Price are subject to change.
- **Unaccompanied Minors** - There is an additional charge of \$40 each way for students that are traveling as **unaccompanied minors**. Please verify with your airline if your child qualifies to travel as an unaccompanied minor. If your child is traveling as an unaccompanied minor, please indicate this on the transportation form on page 11 or notify us in advance. Please note an additional \$15 charge will apply every 15 minutes if the driver has to wait with the minor longer than 2.5 hours for departing flights.

HEALTH SERVICES

Our Health Services Department is comprised of nurses who provide first aid, dispensation of medications and maintain observation beds. Health Services is available on campus or by phone seven days a week. It is the goal of Health Services to provide a safe and healthy training experience.

As a reminder, all Health Services forms must be completed and returned five (5) weeks prior to traveling to IMG Academy. Forms may be faxed directly to Guest Services at (941) 752-2630 or emailed to campforms@imgworld.com.

Medication for Boarding Students

- Your child should not bring over-the-counter medications to IMG Academy unless required by your child's physician. We have medications available for pain, fever, allergy symptoms, nausea, diarrhea, headache and insect bites.
- If your child receives daily medication, the medication should be brought to Health Services upon arrival. Campers are not allowed to keep any medications in their rooms. Prescription medications must be in original containers and labeled with the child's name (not another family member's name), prescribing doctor's name and directions as to how medication is to be given. Do not send medications in weekly pill dispensers. When applicable, please provide English translation for medications. If your child is taking medications by injections these must be approved by Health Services **before** your student travels to IMG. There are many medications such as allergy shots that are not given at IMG.

Other

- Please provide your child with sunscreen and insect repellent and instruct your child to apply sunscreen numerous times a day.
- Hydration – Please instruct your child on the importance of adequate fluid consumption. Your child may be training outdoors in a hot and humid climate where dehydration can occur quickly. Gatorade is one of IMG Academy's Premier sponsors, and we have integrated the Gatorade G-Series into our athletes' workout sessions. This is a three part series which provides energy, fluid and nutrients.
 - 01 Prime: This drink will be distributed at breakfast and lunch every day in the dining areas—for athletes to grab on their way out to a workout session. Prime helps athletes kick start activity by giving them a boost of carbohydrates, B-Vitamins, and electrolytes.
 - 02 Perform: This drink will be distributed during practices, games and Athletic and Personal Development sessions. Perform is the thirst quenching Gatorade that everyone knows and loves, providing electrolytes to maintain hydration. Campers are encouraged to bring their own water bottles to put the beverage in.
 - 03 Recover: This drink will be distributed at the end of the athlete's workout session. Recover contains protein and carbohydrates to rehydrate as well as help the muscles recover from tissue damage.

Part of playing your best means staying hydrated. When you don't replace the fluids and electrolytes you lose in your sweat, you can become dehydrated. Gatorade rehydrates better than water by putting the essential electrolytes back into your body and delivers carbohydrates that energize your muscles and brain.

CAMPUS LIFE

Accommodations

- **Boarding Campers** – Please submit all specific roommate/housing requests no later than two weeks prior to your camper's scheduled arrival date. Be advised that campers are housed by gender and age group. While the housing staff will make every attempt to accommodate as many roommate requests as possible, ultimately, we can not guarantee that your roommate request will be honored.
- **Supervision** - Staff supervises the student residences 24 hours per day/seven days per week.
- **Adult Accommodations** - Parents and families may choose to stay in one of our on campus accommodations. We have Clubrooms, Double Clubrooms, Efficiency Suites, 1, 2 or 3 bedroom suites and 3 or 4 bedroom condos on-site. Please contact Clubhouse at 941.752.2689 for pricing and availability.

Note: Please note pets are not allowed on campus with the exception of service dogs.

Dining

- **Boarding Campers** - Boarding campers will receive breakfast, lunch and dinner delivered in a buffet style environment.
- **Meal Cards** (identification card) - The camper's identification card (issued at check-in) acts as a meal card and must be presented in order to enter the Student Dining Hall and to be served.
- **Non-Boarding Campers** - Non-boarding campers will receive lunch. Additional meals may be purchased at the Guest Services Desk. You may also purchase a meal package from your sport advisor.

Student Bank

- **Personal spending money** - A personal spending account may be opened for each camper with cash, check, credit card or wire payment. If a credit card is used, the 'Student Bank Form' must be completed which may be found on page 10. Based on past history, an amount of \$100 per week is adequate for personal spending. Please note that a 5% service charge applies for any credit card deposits made for spending accounts. Additional money may be deposited by calling the Student Bank at 941.752.2487 or e-mailing studentbank@imgworld.com. Please use the following information for wire transfers.

- **Wire Transfer Notes** -

1. Please send bank/money transfers via regular wire. Funds sent via ACH transactions may not be immediately identified and may be delayed in posting to the participant's account.
2. Please specify the participant's full name when sending any wire payments.
3. Processing fees incurred during the transfer of monies as they clear through all banking channels are paid by the sender.
4. The amount of the credit to your account by IMG Academy, LLC. is the exact dollar amount received by the bank.

- **Wire Transfer Instructions** -

Wire Payments To: Fifth Third Bank: ABA#042000314
Address: 5305 26th Street West Bradenton, FL 34207
Name: IMG Academy, LLC.
Swift Code: FTBC US 3C
Credit Account: #7026375969
Phone: 941.727.2500

NOTE: BE SURE THAT THE PARTICIPANT'S NAME IS ON THE WIRE.

- **Bank Hours** - Student Bank hours will be provided to all campers at check-in. Withdrawals from the account may be made during posted bank hours. Prior to departure, campers should withdraw all money remaining in the account. If the camper fails to withdraw funds, a check will be sent to the camper's home address for cash/check deposits. If the account was opened by credit card, the refund will be applied to that credit card.
- **IMG Academy is not responsible for any money that is not deposited in a camper's personal bank account.**

Laundry and Linens

- **Laundry service** - Available on-campus for our campers. The wash & fold service provides a camper with the opportunity to drop off their laundry in the laundry room and pick it up within 48 hours for a fee. The wash & fold service is \$1.25 per pound with a minimum of \$10. Please note prices are subject to change.
- **Coin operated machines** - Available for campers who would like to do their own laundry. The coin-operated laundry machine is \$4.00 per wash load and \$6.00 per dry load. Laundry soap is available for purchase in the vending area and Sweat X laundry detergent is available for

purchase in the IMG Sports Shop. Please note prices are subject to change.

Phone/Fax

- **Phones** - It is recommended that campers call home upon arrival and notify their family of their room number, bed number and phone number with extension.
- **Long distance** - International calls may be placed provided the camper uses a phone card, credit card or calls collect. Phone cards may be purchased at Guest Services.
- **Cell phones** - Campers are allowed to bring cell phones but they are not permitted to use them during program hours.
- **Switchboard** - The switchboard closes at 11:00pm. In the event of an emergency, call IMG Academy at 941.755.1000. The on-site Property Manager and staff will assist your son/daughter in contacting you immediately.
- **Courtesy phone** - A courtesy phone is available in the front desk lobby for local calls. Calling cards may be used on this phone for long-distance calls.

Mail

- **Incoming mail** - Please send mail to students at the following address:
Camper's Name
c/o IMG Academy
5500 34th Street West
Bradenton, FL 34210
- **Outgoing mail** - May be dropped off in the mail room during posted hours of operation. It is suggested that students bring their own stamps and writing material. Students may pay for postage during mail room hours.
- **Mail** - Camper mail will be distributed by Campus Life.

Pro Shops

- **IMG Sports Shop** - The IMG Sports Shop can be found on-campus in three locations: next to the Jr. Pool, inside the Golf Training Center across from the batting cages, and at the IMG Academy Golf Club. **If you are wondering what to bring, the IMG Sports Shop offers official IMG Academy Under Armour training packages that may be purchased online before you arrive so that you have everything you will need to maximize your training on and off campus.**
- **Hours** - Pro Shop hours will be provided to the campers at check-in.
- The Pro Shops are fully stocked with IMG Academy sport logo merchandise, training gear, teaching manuals, videotapes, nutritional guides, mental efficiency books and Gatorade.
- Campers are allowed to charge purchases to their student bank account.

Nicky B'stro

- The bistro is located inside the Student Union/Dining Hall where a la carte items (sandwiches, pizza, smoothies, salads and snacks) may be purchased.
- Campers may use a credit card, cash or money from their personal spending accounts for payment at the bistro.

Jr. Pool/Student Recreation Center

- **Jr. Pool** - The Jr. Pool is available for campers use during free time. Pool toys are provided. Please refer to What to Bring on page 17.
- **Student Recreation Center** - Open hours will be provided at check-in and are subject to change. The Student Recreation Center houses a pool table, ping-pong table, computer lab, and Xbox 360's among other fun activities.

Activities

- All activities are supervised and may include trips to the beach, mall, theaters and theme parks (Busch Gardens, Disney World, and Universal Studios, etc.). The costs of these activities and any related transportation fees are in addition to program fees. The fees are deducted from campers' personal accounts or paid by cash prior to the trip deadlines.
- **Special trips** – The cost of the theme park trips is not included in the spending money recommendation.

Inclement Weather

- Please note: In case of rain or other inclement weather, sport programs may be shortened or altered. No refunds or credits will apply.

You and your camper are ready to pack! We have broken up the items to bring into two sections. One section to describe items everyone should bring and the other is sport specific. Please double check your inventory to reduce the chance an item is forgotten. **Also, the IMG Sports Shop can be found on-campus in three locations: next to the Jr. Pool, inside the Golf Training Center and at the IMG Academy Golf Club. If you are wondering what to bring, the IMG Sports Shop offers official IMG Academy Under Armour training packages that can be purchased online before you arrive so that you have everything you will need to maximize your training on and off campus.**

SUGGESTED ITEMS TO BRING

<input type="checkbox"/> 8-10 pairs of shorts/skirts **	<input type="checkbox"/> running shoes **	<input type="checkbox"/> sunscreen/lotion**
<input type="checkbox"/> 8-10 pairs of socks**	<input type="checkbox"/> swimsuit	<input type="checkbox"/> personal toiletries
<input type="checkbox"/> 8-10 shirts/tops **	<input type="checkbox"/> beach/bath towels*	<input type="checkbox"/> combination lock
<input type="checkbox"/> Stamps/writing material	<input type="checkbox"/> alarm clock	<input type="checkbox"/> laundry bag
<input type="checkbox"/> X-long twin-size sheets *	<input type="checkbox"/> lightweight jacket*	<input type="checkbox"/> water jug**
<input type="checkbox"/> Pillowcase*	<input type="checkbox"/> phone card for long distance*	<input type="checkbox"/> powdered Gatorade**

- The items above are based on a one-week stay at the Academy. Campers staying multiple weeks will need to adjust this list to accommodate their stay.

* **Please note the Academy does not provide any sheets/pillowcases or towels.** Pillows and mattress pads are provided. Blankets are available upon request with a \$20 deposit.

**These items are available in the IMG Sports Shop for purchase.

- **Items for purchase** - Certain items including sheets, towels, Sweat X laundry detergent, and combination locks are often available to purchase on campus if the student does not bring these items with them.
- **Attire** - Formal dress is not needed. Any after-sport activity will require casual dress only.

PERSONAL ITEMS/LOCKERS

- **Lockers** - Lockers have been placed in the rooms for campers to secure belongings. There are additional lockers located in the Guest Services building restrooms. The Guest Services lockers must be reserved at the Guest Services Desk after arrival.
- **Valuables** - Campers should lock any valuable items (cell phones, money, etc.) in their in-room locker for safety.
- **Lost and found** - Items are kept at Campus Safety's lost & found storage area.
- IMG Academy is not responsible for any lost or missing items. It is recommended that electronic items (iPods, video game systems, Computers, etc.), expensive items, or unnecessary items not be brought to camp. All personal items should be clearly marked in indelible pen.

SUGGESTED ITEMS TO BRING BY SPORT

- **Bring a notebook** to record what you learn, as well as what you want to continue to improve upon when you return home.
- **Practice** - Play as much of your sport as you can before arriving to camp. This will prepare you for the intensive training ahead of you.
- **Train** - It would be beneficial for you to start a personal conditioning regimen. You will benefit and enjoy the program more if you are in good shape.

Note: Check with your doctor before starting any physical conditioning or exercise.

IMG Academy Bollettieri tennis program

Rackets (2-3)	Tennis shoes (2)
T-shirts (12)	Socks (10 pairs)
Sunscreen	Shorts (10)
Water bottle	Jump rope
Bathing suit	Sunglasses
Beach towel	

IMG Academy golf program

Golf clubs	Collared golf shirts
Golf shoes (with soft spikes)	Sunscreen
Water bottle	Golf balls
Visor/hat	Training shoes/sneakers
Collapsible stand golf bag for walking on course	

IMG Academy soccer program

Shirts (2/day)	Shin guards
Soccer cleats (2)	Shorts (2/day)
Sunscreen	Water bottle
Sneakers	Socks (2/day)

IMG Academy baseball program

Tennis/turf shoes	Batting gloves
Fielder's glove/mitt	Sunscreen
Jacket (seasonal)	Workout shirts (5)
Workout shorts/pants (5)	Spikes/cleats
Personal equipment (bats, etc)	Cap
Water bottle	Swimsuit/pool towel

IMG Academy basketball program

Basketball sneakers	Socks (7-10)
T-shirts (8-10)	Shorts (5-6)
Training sneakers	Flip flops (shower)
Swimsuit	Pool towel
Water bottle	

Athletic & Personal Development

Swimsuit	T-shirts (4/day)
Shorts (2 /day)	Socks (3-4/day)
Water (gallon container)	Pool towel
Shoes (for linear and lateral training)	

IMG Academy lacrosse program

T-Shirts (3/day)	Swimsuit
Shorts (2/day)	Pool towel
Socks/underwear (3/day)	Sunscreen
Compression shorts	Sneakers
Grass cleats	Water bottle
All lacrosse equipment & sticks	

IMG Academy football program

T-shirts (2/day)	Swimsuit
Shorts (2/day)	Pool towel
Cleats	Sunscreen
Sneakers	Water bottle
Flip flops	

So you are on your way! If you or your child chooses to drive we have included driving directions and parking instructions. We are excited to meet and greet you.

DRIVING DIRECTIONS

- **Traveling from the South on Highway 41:**

From Sarasota, follow Hwy. 41 to 53rd Avenue West and turn left.
Go to 34th Street West and turn left.
Go to the first light (Bayshore High School) and the entrance to IMG Academy is on your right.

- **Traveling from the South on I-75:**

Take Exit 217 B (old exit 41 B) and travel west on State Road 70 for approximately 20 minutes.
Go to 34th Street West and turn left.
Go to the first light (Bayshore High School) and the entrance to IMG Academy is on your right.

- **Traveling from the North on Highway 41:**

To Bradenton, stay on Hwy. 41 to 53rd Avenue West and turn right.
Go to 34th Street West and turn left.
Go to the first light (Bayshore High School) and the entrance to IMG Academy is on your right.

- **Traveling from the North on I-75:**

Take Exit 217 (old exit 41) and travel west on State Road 70 for approximately 20 minutes.
Go to 34th Street West and turn left.
Go to the first light (Bayshore High School) and the entrance to IMG Academy is on your right.

- **Directions from Sarasota/Bradenton Airport:**

Turn right out of airport exit onto University Parkway.
Turn right onto U.S. 41 North (also Tamiami Trail).
Tamiami Trail becomes 14th Street West.
Turn left onto 53rd Avenue West.
Turn left onto 34th Street West.
Turn right at the first light. This is the main entrance to IMG Academy.

- **Directions from Tampa International Airport:**

Follow I-275 South across the Sunshine Skyway Bridge, to I-75 South.
Take I-75 South to Exit 217 (State Road 70),
Travel west on State Road 70 (becomes 53rd Avenue). Approximately ten miles to 34th Street West.
Take a left on 34th Street West.
At the first stoplight turn right. This is the main entrance to IMG Academy.

PARKING

- All students and families who drive themselves to IMG Academy must receive a parking pass from the front gate when they arrive at the Academy. The students and families will be directed to the appropriate parking area. Failure to park in an appropriate area will result in towing of the vehicle. All applicable fees to retrieve the vehicle will be the responsibility of the student/family. Please pay attention to posted signs to prevent your vehicle from being towed.
- Boarding students who drive alone are not permitted use of their vehicle while enrolled in any of our boarding programs. The student's keys are to be turned in and placed in the Campus Life office. The student can pick them up when he/she checks out of the Academy.

We anticipate your arrival and are excited you have chosen IMG Academy for your training!
Please do not hesitate to call Guest Services at 941-755-1000 for any further assistance or questions.

ON CAMPUS VALUE-ADDED PARTNER SERVICES



JUMPSTART YOUR COLLEGE RECRUITING

As the official high school athletics recruiting sponsor at IMG Academy, BeRecruited is the #1 for high school athletes seeking recruitment from college coaches—where 1.5 million athletes meet over 25,000 coaches.

- » Create your FREE athlete profile and share your best stats and videos with the coaches on your target list by visiting beRecruited.com/IMG.



EXPERIENCE 3D MOTION ANALYSIS

Motus Global is a sports technology firm that specializes in motion capture for athletes of all ages. As the official biomechanics sponsor at IMG Academy, our vision is to use scientific tools to help maximize performance and reduce the risk of injury. The Motus sports science team uses a state-of-the-art, optical motion capture system to accurately track and analyze your specific movements.

- » To inquire about our pricing and services, please visit www.motusglobal.com, call us at (941) 404-6604, or email **Caitlin Pearl** at caitlin@motusglobal.com. The Motus team looks forward to helping you improve your game!

Mission

■ Motus Global is a sports technology firm that specializes in motion capture for athletes of all ages. As the official biomechanics sponsor at IMG Academy, our vision is to use scientific tools to help maximize performance and reduce the risk of injury.

Technology

■ Our 3D state-of-the-art optical motion capture system records athletes' movements at up to 500 frames per second. This allows us to accurately track and observe your sports motion from any angle and at any instant during the movement to calculate our biomechanical measurements. The flexibility of our motion capture system to stay both indoors and travel outdoors provides an essential advantage for our biomechanics research team to track athletes in any environment.

Software Application Platform

■ Our cloud-based data management system, **motus flow**, allows you to store and access data from every facet of your athletic life. Motus 3D biomechanical reports, video tutorials and analyses capabilities, your weekly workout schedule, nutrition log, event calendar, and much more are just a few clicks away.

Services

■ Just like the professional athletes and IMG Academy student-athletes, you can choose from a suite of performance analyses, ranging from basic mobility and stability to sports-specific movements such as baseball pitching and golf swings and more. A customized report is generated for each analysis, comparing your movement patterns to our expansive database. This information can then be shared with coaches, trainers, and medical staff to help identify areas of improvement in power, coordination, flexibility, and other key elements of athletic performance.



1 **visit** www.motusglobal.com

2 **click** Sign Up!

3 **create** your personal **motus flow** account today!



■ Our strong partnerships with world-renowned orthopedist Dr. James Andrews and the American Sports Medicine Institute (ASMI), Motion Analysis Corporation, and Fusion Sport, and our continued work with Olympic and professional athletes further solidify the importance of biomechanical analysis for today's athletes.

■ Don't forget to sign up for your analysis this summer by creating a free **motus flow** account! Once you've signed up, click on **My Resources** and complete your waiver and profile!



To inquire about our pricing and services, please visit www.motusglobal.com, call us at (941) 404-6604, or e-mail us at imgcamps@motusglobal.com.

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human performance analysis

GATORADE SPORTS SCIENCE INSTITUTE



GATORADE SPORTS SCIENCE INSTITUTE AT IMG ACADEMY

The Gatorade Sports Science Institute (GSSI) launched in 1985 and is committed to helping athletes optimize their performance by driving the research, improving education and providing world-class sports science service. In 2011, GSSI opened a satellite lab in Bradenton, Florida, focused on helping to improve the performance of IMG Academy student-athletes. The GSSI Performance Lab at IMG Academy is located on campus and provides access to some of the world's best sports science. It is GSSI's first satellite location and the only one based in the United States.

With 900-plus youth athletes enrolled as full-time students and thousands more attending IMG camps and tournaments, GSSI scientists have unique access to youth athletes. In addition, GSSI also works with and tests an array of professional athletes that utilize IMG Academy as a training base. This consistent access to male and female athletes across eight different sports provides the opportunity to collect data and advance sports-science research as it relates to overall athletic performance.

ATHLETE SERVICE AT IMG

GSSI's service model focuses on improving performance from a nutrition, hydration and recovery perspective. GSSI scientists share their observations and key learnings with athlete influencers who use the technical insights to help create individualized strategies for each athlete. IMG Academy's athlete influencers include a full-time training and coaching staff, complete with sport coaches, strength and conditioning coaches, medical and nutrition specialists, among others.

REASONS TO PARTICIPATE IN GSSI ATHLETE SERVICE AT IMG

The difference between elite athletes is razor thin and growing smaller, with all serious athletes looking for new ways to gain "an edge."

GSSI scientists strategize and work closely with the athlete and his or her coach, trainer, nutritionist and/or other influencers to identify areas of opportunity and develop a customized plan based on the athlete's specific needs and interest.

GSSI SERVICES

Scientists at the Gatorade Sports Science Institute at IMG Academy use their expertise in sports nutrition and exercise performance along with cutting-edge equipment to help athletes looking to proactively identify areas of opportunity. They can conduct physiological and nutrition needs analyses, gather data and work with athletes and their influencers to develop customized strategies to address the discoveries and help improve performance.

For athletes who have a specific difficulty they'd like help with, some of the commonly-experienced issues GSSI may be able to help resolve include:

Hydration/Electrolyte Concerns

Nutrition Optimization

Weight Management Issues

Energy/Fatigue Issues

Gastro-Intestinal Complaints

Injury/Safety Profiling & Troubleshooting



GATORADE SPORTS SCIENCE INSTITUTE



Some of the tests conducted at the GSSI Performance Lab at IMG Academy include:

Resting Metabolic Rate

Resting metabolic rate can serve as a starting point for understanding how many calories an athlete should consume per day. This is especially helpful for athletes trying to lose or gain mass.

Body Composition

Scientists track and measure changes in fat and lean muscle mass. A greater ratio of lean (muscle) mass to fat mass can be related to improved athletic performance, particularly where speed, strength, power and agility are important. Additionally, an increase in lean (muscle) mass will increase caloric expenditure both at rest and during physical activity.

Wingate

Many sports require rapid rest-to-exercise transitions and explosive bursts. The Wingate is one of the more popular tests to assess an athlete's power output. It measures power and fatigue.

Cognitive Performance

Being aware of what is happening on the field of play and making quick decisions is critical for many athletes. This test assesses reaction time, an important component of performance for skill athletes.

Motor Skills

Motor skills are an essential component of performance for many athletes and require the muscles (physical) and the brain (cognitive) to work together. Testing allows us to assess the combination of these two processes.

FAT_{MAX} and VO₂ PEAK

This test measures how the athlete's body uses fuel sources (carbohydrate vs. fat) at different exercise intensities. As a maximal exertion test, the test also provides an assessment of aerobic fitness, which can influence how long he or she can perform before fatigue and/or failure.

Muscle Strength

Different limbs are tested for strength, as well as the balance in strength between muscle groups and sides of the body (right vs. left).





GATORADE SPORTS SCIENCE INSTITUTE

In the fall of 2011, the Gatorade Sports Science Institute (GSSI) opened its first, and still only US-based, satellite facility on the IMG campus. Headquartered in Barrington Illinois, and with nearly 30 years of sports science experience, GSSI is committed to helping athletes optimize their health and performance through research and education in hydration and nutrition science. The GSSI Performance Lab at IMG is only the second of its kind in the world.

With the help of cutting edge equipment, GSSI scientists will use their expertise in sports nutrition and exercise performance, along with the data gathered at this lab, to find strategies to help IMG athletes achieve their best performance. This exclusive testing will provide a variety of information, possibly including: assessments of an athlete's endurance, explosiveness, muscle strength, motor control, reaction time, fatigue, fuel use, body composition, fluid and electrolyte needs, and nutritional habits. These tests are the same that we conduct with some of the world's top athletes like Dwyane Wade, Abby Wambach, Misty May-Treanor, and Kerrie Walsh. As an IMG Academy student-athlete, you will benefit from this new facility and the expanded educational offerings that Gatorade will provide if you elect to participate.

This service will complement the athlete's individual training needs and assess their training plan. Additionally, the performance testing may provide quantitative measurements of exercise caloric needs, the contribution of fat and carbohydrate to those caloric needs, nutrition habits, and body composition, all of which can be used by nutrition staff to plan and design individual nutrition strategies.

To be considered for participation, we need all athletes and their parents (for athletes under 18) to complete several forms, the first of which is a Physician's Clearance form (included in this packet). It must be completed by the athlete's personal/team physician (MD, DO only). Upon arrival, return of the physician's clearance and/or arrival on campus, we will also require the athlete to complete a General Health Questionnaire and an informed consent form (this must be signed by both the athlete and parent/legal guardian for athletes under the age of 18).

We hope that you will elect to participate in this exclusive GSSI testing and we look forward to working with you.

Regards,
Melissa Anderson, MA
R+D Principal Scientist
Gatorade Sports Science Institute

FORM Completed by Physician

Fax to: GSSI Physiology
Attn: Melissa Anderson
941-201-3820



Date: ____/____/____

Gatorade Sports Science Institute
5500 34th Street W.
Bradenton, FL 34210

To the Participating Physician:

The requirement of the Gatorade Sports Science Institute (GSSI) is to have a formal physician's clearance for an athlete's participation for physical exercise testing at the GSSI Labs. We request this authorization to safeguard the athlete. In order to validate this document, you must have examined the athlete requesting this form within the last one year, you must be the athlete's personal / family physician or team physician, and you must be familiar with his or her medical history.

GSSI sport science testing involves running, cycling, or doing sport specific drills as part of a battery of physical exercise tests and data collection to learn about the athlete's physiological response to exercise. These tests involve but are not limited to urine analysis, saliva collection, blood sample collection, body composition, and an interval-based progressive intensity exercise test that can last up to 60 minutes to determine energy expenditure (carbohydrate oxidation), maximal aerobic capacity ($\dot{V}O_{2max}$), heart rate response, and sweat loss. Please note the athlete will be asked to provide maximal exertion and effort during the final stages of some of these tests. If there is any medical history that you think would preclude this athlete from participating in our test protocol, do not sign this form.

In lieu of submitting recent EKG tracings (within the past 6 months) obtained during a standard exercise stress test for _____ (Athlete's name), I give my written approval that he/she has been examined by me as recently as _____ (date of last exam), is physically fit, and of substantial health sufficient for participation in a maximal exercise protocol in your laboratory.

Sincerely,

Team/Personal Physician Signature

_____/20____
Date

Please Print:

Physician: _____

Organization: _____

Address: _____

Phone: _____

PLEASE FAX DIRECTLY BACK TO GSSI AT 941-201-3820