2016 Liberty Flames
Summer Golf Camp

Liberty Flames Golf Camp
June 26-30, 2016

Overview: Designed for the middle or high school golfer who has a desire to improve and a strong interest in playing college golf. Campers will receive instruction from current Liberty coaches at the brand new, on-campus golf facility. Campers will play at local courses and receive an overview of the college recruiting process. Open to ages 13-18.

Benefits:
- Instruction on full swing, short game, putting, rules, and mental strategies
- Three rounds of golf (weather permitting)
- Overview of college recruiting process
- Daily devotions
- Liberty Golf T-shirt and hat
- Prizes

Cost:
- $795 – overnight option (boys only)*
- $625 – commuter option (boys and girls)**

*Includes meals and four nights lodging in an apartment-style dorm
**Includes lunch each day

Visit LibertyFlames.com/Golf to register or for more information.
Return completed forms to Ian McConnell at ipmconnell@liberty.edu or mail to:

Liberty Flames Golf Camps
1971 University Blvd.
Lynchburg, VA 24515

The camp is open to any and all entrants (limited only by number age, grade, level, and/or gender).

Space Is Limited
Register Now!
Deadline: May 31st
Basic Information

- **Registration Deadline**: May 31, 2016
- **Deposit Due With Registration**: $295
- **Transportation**: Each camper is responsible for their transportation to and from the camp
- **Space is limited. Enrollment is awarded by date application is received and will be confirmed with a Confirmation Letter, Camp Medical Form, and Camp Information packet. The final payment and Camp Medical Form are due one week before the beginning of camp.**

Facilities We Will Use

**Liberty Golf Practice Facility**
- The practice facility consists of three tee boxes and more than 15 targets including pins and bunkers
- We have a 9,000-square-foot putting green surrounded by chipping areas and bunkers, and we are in the process of building another 9,000-square-foot green
- The Hall-Landrey Coaching Center also provides the ability to hit out of heated hitting bays and practice putting to both regulation and smaller sized holes

**Clarkson Clubhouse**
- Our state-of-the-art clubhouse opened in October 2014 with a team locker room, offices, and a conference room/kitchen
- The team locker room will be a great place for you to relax and watch tv in recliners
- The clubhouse also includes a room with a simulator and a ping pong table, which is popular among golfers

**East Campus Dorms**
- You will stay in our on-campus, apartment-style dorms that are walking distance to the football stadium and dining hall
- These are the same dorms many students live in during the school year and are the most convenient and upscale rooms on campus

**Poplar Grove Golf Club**
- On the days we go to the course, we will be playing at Poplar Grove Golf Club in Amherst, which is about a 15-minute drive from our practice facility
- Poplar Grove was the final golf course designed by Sam Snead and has been rated as one of the top courses in Virginia for many years
Registration: Camp check-in will take place between 3-4 p.m. on Sunday, June 26, at the David’s Place Clubhouse on East Campus. At 4 p.m., Coach Thomas will welcome the campers and introduce the camp coaches. Golf activities will begin at 5 p.m. at the Clarkson Clubhouse.

Transportation: Each camper is responsible for their transportation to and from the camp. Lynchburg Regional Airport (LYH) is located 5 minutes from the campus. Arrangements for pickups and drop-offs from Lynchburg Regional Airport can be made by calling Ian McConnell at (813) 244-1836.

Lodging: Campers will be housed on campus in an air conditioned apartment-style dorm with two or three campers in each room. A member of the coaching staff or a camp counselor will be staying in each dorm to provide supervision.

Linens / Personal Items: Linens and personal items are not furnished by the camp. Each camper will need to bring linens or a sleeping bag, pillow, blankets, towels, and toiletry items for the week.

Medical Form & Liability Waiver: Each camper must have a completed medical form and a signed liability waiver in order to participate in the camp activities.

Cell Phones: Campers are permitted to bring cell phones; however, they are not allowed to be used during golf related or any other group activity. Parents needing to contact their child between 9 a.m. – 5 p.m. may call the golf office at (434) 582-2384. Coaches will check voice messages periodically throughout the day.

Pickup/Departure: Campers should be picked up at the David’s Place Clubhouse at 11 a.m. on Thursday, June 30. If possible, please do not schedule departing flights prior to 5 p.m.

What to Bring:
- Clothes for length of stay
- Three Collared golf shirts and non-denim shorts/pants for golf course days
- T-shirts allowed other days
- Personal items (soap, shampoo, toothpaste, deodorant, etc.)
- Linens and blankets for single bed or a sleeping bag
- Towels
- Golf clubs, golf bag, golf balls, and golf towel
- Umbrella (optional)
- Bible
- Notebook / journal
- Spending money for snacks and souvenirs

Liberty Flames Golf Camps
1971 University Boulevard, Lynchburg, VA 24515
Phone: (434) 582-2384
Email: ipmconnell@liberty.edu

The camp is open to any and all entrants (limited only by number, age, grade, level, and/or gender).
MEDICAL FORM
MEDICAL HISTORY, TREATMENT PERMISSION, AND RELEASE

*This form is required prior to participation in summer sports camps.
Participation will not be permitted until this form has been completed, signed and on file with the camp.

PLEASE PRINT
Liberty Flames Golf Camps                                                                   Date: June 26–30; July 25–28

Participant Information:
Name: (First, Middle, Last) ________________________________________________________________
Age: ________ Date of Birth: ______________
Home Address: ________________________________________________________________
(Street Address, City, State, ZIP)

Father/Guardian Name: ________________________________________________________________
Address: ________________________________________________________________
Phone: Home (____) __________________ Work (____) __________________ Cell (____) _________________

Mother/Guardian Name: ________________________________________________________________
Address: ________________________________________________________________
Phone: Home (____) __________________ Work (____) __________________ Cell (____) _________________

Other/Emergency Contact Name: _______________________________________________________
Phone: Home (____) __________________ Work (____) __________________ Cell (____) _________________

Family Physician: ________________________________________________________________
Phone: (____) __________________
Insurance Company: __________________________________________ ID Number: _______________
Medical History: ________________________________________________________________
Date of Last Tetanus Booster: ________________________________

Is the participant under the care of a provider for a medical and/or psychological problem? NO / YES
If yes, please explain: ________________________________

Is the participant taking medication prescribed by a health care provider? NO / YES
If yes, please explain: ________________________________

Allergies?
If yes, please list the allergy and provide additional information.
Insect bites/stings: NO / YES __________________________________
Medications: NO / YES __________________________________
Food: NO / YES __________________________________
Other: NO / YES __________________________________
Parental Consent Form

This completed form will enable health facilities in Lynchburg as well as camp medical staff to provide prompt care to your minor son or daughter. All areas of this form must be completed prior to camp registration. I/We, the undersigned, hereby certify that I/we am/are the parent or legal guardian of the camper. During the period of the camp, I/we hereby give permission for the staff of the camp to seek appropriate medical attention for the camper, and for medical attention to be given, and for the camper to receive medical attention in the event of accident, injury, or illness. I/We will be responsible for any and all cost of medical attention and treatment.

I/We, the undersigned, for ourselves and as guardian(s) of (camper’s name) __________________ understand that golf is an active, physical sport, and that injuries can take place during play. I/We understand that, as with any sport, injuries can occur, and we hereby affirm that our child is physically and mentally capable of participating in golf and camp activities.

I/We represent that I/we have sought the opinion of our child’s pediatrician, __________________, and he concurs that ______________ is fully capable of safely engaging in these activities. I/We also understand that it is my/our responsibility in caring for the camper listed above, to be assured that he/she is fully capable of engaging in this sports activity, and I/we are confident that he/she is able to engage in such sport.

I/We, the undersigned, for ourselves, our heirs, executors, and administrators; waive, release, and forever discharge LU Golf Team, Jeffery Thomas, as well as his staff, officers, agents, employees, representatives, and successors and assign of and from all rights and claims for damages, injury, or loss to person or property that may be sustained or occur during participation in camp activities or while at camp, whether or not damage, injury, or loss is due to negligence.

Signature of parent or guardian: ______________________________  Date: _____________________
Signature of parent or guardian: ______________________________  Date: _____________________

Additional Information:

*Please attach a copy (front and back) of your health insurance card to this document*
2016 LIBERTY FLAMES GOLF CAMP
REGISTRATION FORM

Name: _______________________________
Home Address: _____________________________________
City: ___________________   _State: ____ ZIP code: ________
Home Phone: __________________________________
Date of Birth: ___/___/___ School Grade: ___________
Golf Skill Level: ____Beginner ____Intermediate ____Advanced
Average Score: _____ 9 Hole _____ 18 Hole
T-shirt Size: (Adult): S  M  L  XL
Parent Information:
Name(s): ________________________________________
Email: ________________________________________Cell Phone:________________________________

Deposit Due with Registration Form:
_____ Liberty Flames Golf Camp (Overnight):  $295*
_____ Liberty Flames Golf Camp (Commuter):  $175*
    *Refunds prior to May 31:  amount paid minus $100 administration fee

Checks Payable to: J&H Thomas Golf, Inc.
Mail Registration Forms and Payment to:
    Liberty Flames Golf Camps
    1971 University Boulevard
    Lynchburg, VA 24515

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