



MATT TALLMAN

**Camp Director,
Associate Head Men's Coach at Notre Dame**

In his seventh year with the program, Matt Tallman helped the Irish earn back to back BIG EAST titles in 2005 and 2006. Prior to Notre Dame, Tallman was an assistant coach at the University of Maryland and head coach at Indiana University of Pennsylvania where he was the PSAC Coach of the Year in 1999. He has directed swim camps at Marymount University and IUP and took over as the director of the Notre Dame Swim Camps in 2006.



TIM WELSH

Head Men's Coach at Notre Dame

Tim Welsh, the founder and former director of the Notre Dame Swim Camps, brings 23 years of head coaching experience at Notre Dame to camp this summer. His 2005 and 2006 team won the BIG EAST Championship, and continues to be ranked in the top 25 nationally in the CSCAA Dual Meet poll. Tim is the past Chair of the NCAA Swimming Committee, and the current President of the BIG EAST Coaches Association. He has also served multiple terms as a member of the America Swimming Coaches Association Board of Directors. He is a three time BIG EAST Coach of the Year recipient.



CARRIE NIXON

Head Women's Coach at Notre Dame

One of the most decorated student-athletes in any sport in Notre Dame history, Carrie Nixon took the reigns as head coach of the women's team for the 2005-2006 season. The team has won two BIG EAST titles under Nixon and a total of eleven consecutive titles. Nixon, a 2002 graduate and former NCAA recordholder in the 50-yard freestyle, won 18 BIG EAST titles and earned All-American honors on 12 occasions.



JOEL WHITE

Assistant Women's Coach at Notre Dame

Joel White has brought a charge of excitement and enthusiasm to the Irish that helped them to their eleventh BIG EAST title last year. Currently in his third season with the Irish, White was previously an assistant coach at the University of Utah. There he earned his masters in sports psychology. While at Utah, he helped the team to a regular season conference title and several NCAA Qualifiers. Prior to White's college debut he coached at Homestead High School in Mequon, Wisconsin as well as Schroeder YMCA. In his two years at Homestead he led them to 5 individual state titles and 9 All-Americans.



INSURANCE:

Accidental death and dismemberment coverage is provided according to schedule and with a maximum principal sum of \$1,000; medical expense coverage is provided with a maximum of \$50,000. Claims up to \$250 per claim will be paid on the excess basis, meaning that family or employer group coverage must pay its maximum first. This refers to medical expenses incurred because of injury related in any way to my child's participation in, attendance at, activities at, or incidental to camp activities. Hernias are not covered. The contracting of illness of disease by camper is not covered under this plan. Payment for medication and/or hospitalization needed by camper as a result of illness of disease is the responsibility of the camper and his/her parents. Any additional coverage desired will also be the responsibility of his/her parents.

TRANSPORTATION:

For those needing to fly to South Bend, please call Anthony Travel, the Official Travel Partner of Notre Dame, at 1-800-366-3772. Identify yourself as attending the summer sports camps, and their on-campus sports travel professionals will research the most cost-effective flight options for you and provide invaluable consultative advice on traveling to campus.



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UNIVERSITY OF NOTRE DAME
P.O. BOX 767
NOTRE DAME, INDIANA 46556-5678



NOTRE DAME® SWIMMING

2008 NOTRE DAME®
SWIMMING CAMP

Camp 1 June 15-19 Training Camp

Camp 2 June 22-26 Stroke Technique Camp



Application, Consent to Treatment, and Health Form must be completed and sent along with FULL payment to the Camp Office for enrollment. No deposits accepted.

CAMPER'S NAME: LastFirstMI

ADDRESS:Street

CityStateZipTelephone

Age (during camp)Shirt SizeSex

DATES AND FEES:

- CAMP 1:

☐ June 15-19: Training Camp

This is a serious training camp for swimmers age 9-17. At least two workouts a day, supplemented with classroom sessions, will be central to camp. Campers registering for this camp must be ready to train long course in a training camp environment. There will also be a stroke technique session incorporated daily during the training camp.

☐ Boarders (\$595.00)☐ Non-boarders (\$495.00)
- CAMP 2:

☐ June 22-26: Stroke Technique Camp

The emphasis of this camp will be stroke technique and learning to swim each stroke efficiently. The camp is open to swimmers age 9-17. Campers can expect two water sessions totaling 4 hours of instruction, plus other related activities each day.

☐ Boarders (\$595.00)☐ Non-boarders (\$495.00)

* Please note: The non-boarder fee is \$100 less than the boarder fee. Space is limited.

PAYMENT BY: ☐ Check☐ MasterCard☐ Visa

Please make checks payable to the Notre Dame Swimming Camp. Please send check and application to the address on next panel. Checking account debit cards **will not** be accepted. In accordance with NCAA regulations, a high school student's expenses must be paid by the student's parent or legal guardian. No third party payment will be accepted.

CARD #EXP. DATE

CARDHOLDER NAME (print)SIGNATURE

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PHONE: HomeWork

ADDRESS: (If different from above)

SAMPLE DAILY SCHEDULE

7:00	Breakfast in Dining Hall
8:00 - 10:30	Pool Session #1
11:30 - 1:30	Lunch and Rest
1:30 - 3:30	Pool Session #2
4:00 - 5:00	Camp Meeting/Class Session
5:00 - 6:30	Dinner and Rest
6:30 - 7:30	Evening Program/Class Session
8:00 - 9:00	Pool Session or Activities
10:30	Lights Out

2008 APPLICATION

NOTRE DAME SUMMER SWIMMING CAMP

University of Notre Dame
P.O. Box 767 • Notre Dame, IN 46556-5678
(574) 631-8788
E-mail: ndcamps@nd.edu

CONSENT TO TREATMENT
LIMITATION AND WAIVER OF LIABILITY

In consideration of my child's acceptance in the Notre Dame Summer Swimming Camp, I individually and on behalf of my minor child, do hereby release and forever discharge the University of Notre Dame du Lac and its officers, trustees, employees, contractors and representatives from all liability of any kind for any claim, demand, action, cause of action, damage, judgment, cost or expense which arises out of, occurs during or relates in any manner to my child's participation in, attendance at, activities at, or incidental to the aforementioned summer camp. In the event of an accident, injury (including death), illness or other damage sustained by my child while traveling to or from, or during his or her attendance at, the Notre Dame Summer Sports Camp(s), I understand and hereby acknowledge that my only remedy and my child's only remedy will be the coverage, if any, provided by the medical insurance policy covering participants in the Notre Dame Summer Sports Camps as explained in this brochure and set forth in the insurance policy. I hereby grant permission to the staff and physicians of the University of Notre Dame and any other medical provider or surgical consultant deemed advisable by Notre Dame, and any hospital or similar facility, to render the above-named camper any medical, surgical, or other treatment that they deem necessary. I understand that the University will exercise its best efforts to inform me in the event of such treatment.

I also understand and acknowledge by my signature below that the University of Notre Dame does not have the medical staff or resources available during summer camps to store or administer prescription or non-prescription medications for my child. I have decided as the child's parent or legal guardian that my son or daughter is capable of taking his or her own medication(s) throughout his or her stay at Notre Dame, or that one of my child's parents or his or her legal guardian will be personally present and available to administer the medication to my child throughout the camp. I know that Notre Dame staff will not store or administer medications, prescription or non-prescription, for my child during the camp. If I decide that my child can take his or her own medication during camp, I will make arrangements, as needed, to remind my child to take his or her medication. If my child possesses any medications (prescription or non-prescription) during camp, I understand that it will be my child's sole responsibility to safeguard and self-administer the medication at all times. The University will not be responsible for lost or stolen medication(s). I, individually, and on behalf of my child and our respective heirs, successors, personal representatives and assigns hereby release and forever discharge the University and its officers, trustees, employees, contractors and representatives from all liability of any kind for any claim, demand, action, cause of action, damage, judgment, cost or expense which arises out of or relates in any manner to the use, misuse, theft, loss or failure to adequately safeguard my child's medication at any time.

I also understand and acknowledge that the University of Notre Dame may transport my child to off-site athletic facilities. I, individually and on behalf of my minor child, do hereby release and forever discharge the University of Notre Dame du Lac and its officers, trustees, employees, contractors and representatives from all liability of any kind for any claim, demand, action, cause of action, damage, judgment, cost or expense which arises out of, occurs during or is related to, in any, the travel to off-site athletic facilities.

PARENT OR LEGAL GUARDIAN'S NAME (printed)

SIGNATUREDATE

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PHONE: DayNight

()

PHONE: Emergency

PLEASE DO NOT USE STAPLES

FOR OFFICE USE ONLY:

CAMP CODE

AMOUNT

CK #/B-

CAMPER'S HEALTH FORM

To be completed and signed by camper's parents or legal guardians

- ☐ ASTHMA☐ HEAD INJURY/CONCUSSIONS
- ☐ BLEEDING DISORDERS☐ HEART DISEASE
- ☐ CONVULSIONS/SEIZURES☐ RHEUMATIC FEVER
- ☐ DIABETES

ALLERGIES TO DRUGS

ALLERGIES TO FOODS
(that require dining hall intervention)

LAST TETANUS IMMUNIZATION (date):

CURRENT MEDICATIONS:

CHRONIC OR RECURRING ILLNESSES:

OPERATIONS/INJURIES (including dates):

PHYSICAL RESTRICTIONS*:

PHYSICIAN TELEPHONE

DENTIST TELEPHONE

NAME OF INSURANCE

TELEPHONE NUMBER FOR CLAIMS

CONTRACT NUMBER

GROUP NUMBER

NAME OF EMPLOYER

EMPLOYER PHONE NUMBER

NAME OF POLICY HOLDER

PARENT AUTHORIZATION/

RELEASE OF INFORMATION

This health history is correct to the best of my knowledge and my child has my permission to participate in camp activities with the exception of those noted above*.

I authorize University of Notre Dame Health Services to release medical information regarding the above named participant to interested parties including parents and family physician.

PARENT OR LEGAL GUARDIAN MUST SIGN

I have read and I understand the camp program and application process as described in this brochure.

PARENT OR LEGAL GUARDIAN MUST SIGN

Please Read Carefully and Retain for Your Information SITE:

The setting for the Notre Dame Summer Swimming Camp is the nationally renowned campus of the University of Notre Dame, located on the outskirts of South Bend, Indiana, 90 miles east of Chicago on the Indiana Toll Road. All campers will reside in one of the residence halls normally occupied by undergraduate students of the University. Meals will be served in the North Dining Hall. Many of the nation's finest athletic facilities will be utilized during each camp session.

APPLICATION PROCEDURES:

All prospective campers must submit the completed application portion of this brochure. Applications will be processed on a first-come, first-served basis until all sessions are filled. Acceptance of a camper will be verified upon receipt of the camp confirmation packet. Please read the confirmation packet carefully as it details the camp schedule, items to bring, as well as roommate and transportation information. If after reviewing the confirmation packet, you have additional questions, please contact the camp office at ndcamps@nd.edu or (574) 631-8788. **Before sending in this application, please make sure all 3 signature spots are signed by a parent or legal guardian and full payment is included, or your application will be returned.** Please note: There will be a \$25 walk-up fee for any application not received by the camp office prior to the start of registration.

If a camp has been filled prior to the receipt of a camper's application, the camp office will offer you the opportunity to have the application held on a waiting list if desired. If the application cannot be accepted for any reason, the application and camp fee will be returned by mail.

ROOMMATE REQUEST:

Please **do not** include your roommate request with your application, as it **will not** be considered. A roommate request form will be included in the confirmation packet, which can be filled out and returned to the summer camp office. Please keep in mind that we do our best to meet all roommate requests, however, due to accommodation limitations we cannot always meet every request, and we will be under no obligation to honor requests received less than seven days prior to the start of the camp. The majority of our dorm rooms are doubles, but campers could be placed in singles, triples, or quads, depending on the dorm in which the camp is residing. We **do not** accept requests for triples or quads.

DATES & FEES:

- CAMP 1:

June 15-19 Training Camp

☐ Boarders (\$595.00)☐ Non-boarders (\$495.00)
- CAMP 2:

June 22-26 Stroke Technique Camp

☐ Boarders (\$595.00)☐ Non-boarders (\$495.00)

IMPORTANT NUMBERS

NOTRE DAME CAMP OFFICE: 574-631-8788
E-MAIL: ndcamps@nd.edu

Frequently asked questions answered on our website at www.und.com

REFUND PROCEDURES

If an accepted application is withdrawn for any reason up until 8 days prior to the start of the camp session, you will receive a refund less a \$75 cancellation fee. **No** refund will be issued within **1 week** of a camp session's start date.