

Date: \_\_\_\_\_

Attn: \_\_\_\_\_ (Athletic Director name):

This letter is to inform you of student-athlete participation as a clinician at an upcoming youth camp/clinic.

\_\_\_\_\_ (student-athlete name) will be working as a clinician, aide, assistant coach or demonstrator at a youth camp/clinic. The school team coaches, all camp or clinic coaches, and the athletes understand that this participation is strictly voluntary; it is not a required obligation as a member of the school team. Also, coaches and student-athletes understand that no coaching can take place between the high school coaches and the high school program athletes.

Name of camp/clinic: \_\_\_\_\_

Coach of clinic: \_\_\_\_\_

Sport(s): \_\_\_\_\_

Dates and hours student will serve as clinician, aide, assistant or demonstrator: \_\_\_\_\_

Pay, if any, for the student-athlete: \_\_\_\_\_

I understand that all of the above is accurate, and I agree with the rules regarding student-athletes serving as clinicians, aides, assistant coaches or demonstrators. I will inform the athletic director if any of the above information changes.

\_\_\_\_\_  
(student-athlete signature)

\_\_\_\_\_  
(coach signature)