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**MINOR BOX LACROSSE CAMP REQUEST APPLICATION FORM**

**BCLA Minor Directorate Operating Policy:**

**15.01** Associations wishing to host any camps must apply to the Minor Directorate through the BCLA Office a minimum of four weeks prior to the first date of the camp. The application will be reviewed by the BCLA Office and approved by the Minor Directorate Chair (or designate).

All of the following rules must be followed or a Camp will not be a BCLA-sanctioned event and the event and all its all players will not be insured under the BCLA Liability and/or Accident Medical/Dental Insurance Program. **It will be the responsibility of the Host Association to ensure that:**

1. All players must be currently registered with the BC Lacrosse Association.
2. All Camps must have the approval of their Local Lacrosse Association Executive/Board. This is confirmed by the President's signature on the form below.
3. All Camps must have the approval of the BC Lacrosse Association.
4. All instructors, including current Senior/Junior/Intermediate athletes, have the appropriate NCCP Coach Certification.
5. All adult instructors have completed a criminal record check within the last three years.
6. Any Minor Box athletes participating with assisting camp instructors must wear all of their appropriate protective equipment, including a mouthguard.
7. Must be held within the boundaries of the local association applying to host the camp, or with the approval of the local Association President of affected club.

This application will be reviewed by the Minor Directorate Chair who may consider various issues (i.e., timing of the camp in the off-season, to ensure there are no conflicts with existing Field Lacrosse programs, Team BC Tryouts, Provincials, etc). Should a conflict exist, the Minor Directorate and Host Association will work together to find an agreeable date. A camp application will only be considered for Member Associations that are in good standing with the BCLA and the respective Commission.

**Minor Box Lacrosse Association Camp Information**

Host Association: \_\_\_\_\_ Application Date: \_\_\_\_\_  
 President's Name: \_\_\_\_\_ President's Signature: \_\_\_\_\_  
 President's E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Proposed Dates of Camp: \_\_\_\_\_ Fee (if any): \_\_\_\_\_  
 Name of Camp: \_\_\_\_\_ Location of Camp (Arena/Box): \_\_\_\_\_

**(Please use additional page, if necessary):**

INSTRUCTORS NAMES	NCCP CERTIFICATION LEVEL	VERIFIED CRIMINAL RECORD CHECK

**BCLA Minor Directorate Chair Approval:** \_\_\_\_\_  
Signature Date