Certificate of Sponsorship

I, the undersigned, am acting as representative of a University department/agency or registered group of student, staff, or faculty members that is willing to assume the responsibility of serving as Campus Sponsor for the camp activity described below. I understand that, as Campus Sponsor, my organization is guaranteeing funds will be made available to cover all costs associated with the camp program. A non-refundable deposit in the amount of $500/camp (payable to Auburn University) is enclosed for the purpose of reserving the Auburn University facilities specified on the attached Facilities Request Form for this camp. I understand the deposit will be refunded in full if Auburn University is unable to reserve the facilities as requested. If the camp is scheduled and the camp is held, the deposit will be applied against camp costs. If the camp is scheduled and later canceled, the deposit will be forfeited.

I have read the current “Auburn University Policy Pertaining to Summer Camps” as posted on a link to the Summer Camp web page (www.auburn.edu/summercamps) and understand that, as Campus Sponsor, I will have the following responsibilities:

1. To serve as liaison with all University agencies supporting the camp;
2. To coordinate arrangements for use of University facilities in accordance with University scheduling regulations;
3. To have put into force, if appropriate, a contract with the client group conducting the camp;
4. To acquaint the Camp Director with University policy, emergency procedures, and facilities layout;
5. To assist, as required, with check-in of campers;
6. To provide a Locator List and a Camp Schedule to appropriate Housing personnel and the campus switchboard for use in making emergency notifications.
7. To be accessible in emergency situations;
8. To maintain necessary reports and documentation;
9. To assist, as required, with check-out of campers;
10. To check on any damages reported;
11. To coordinate approval of invoices for University services and facilities.

Camp Sponsored: __________________________  Desired Camp Dates: __________________________

Camp Director: __________________________  Phone/Email: __________________________

Sponsoring Organization: ____________________________________________________________

Name of Representative: ____________________________________________________________

Campus Phone #: __________________________  Email: __________________________

Signature: ____________________________________________________________

[Note: Submit a signed certificate for each camp to be sponsored]