## **Certificate of Sponsorship**

## (Please submit a signed certificate for each camp to be sponsored)

I, the undersigned, acting as a representative of ASU Department, campus or registered group of students, staff or faculty member am willing to assume the responsibility of serving as **Camp Sponsor** for the camp purpose/activity describe below. I understand that, as Camp Sponsor, my department or campus is guaranteeing funds will be paid to cover all costs associated with this camp. **A nonrefundable deposit of \$200 (payable to Alcorn State University) is enclosed for the purpose of reserving the ASU facility specified on the attached Request for Use of Facility Form.** The deposit will be refunded in full if ASU is unable to reserve the facility as requested. I have read the current ASU Summer Camp Policy as posted on the Summer Camp web page and understand that, as Camp 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 provide an Emergency Locator List for Summer Camps (with a camp schedule to be provided to the ASU Campus Police, and the Vice President of Finance and Administration and the appropriate Housing personnel no later than 3 hours after camp registration ends;

6. To be accessible in emergency situations; and maintain necessary reports and documentation;

7. To assist, as required, with check-out of campers;

8. To check on any damages reported;

9. To coordinate approval of invoices for University services and facilities.

## Purpose of Camps: (Attach a separate sheet if needed)

Anticipated Attendance:		
On-Campus Housing Needed: Yes	NO	
Camp Sponsored:	Desired Camp Dates:	
Camp Director:		
Email:	Phone:	
Sponsoring Department:		
Name of Representative:		
Campus Email	Phone:	
Signature:		
Signature:		