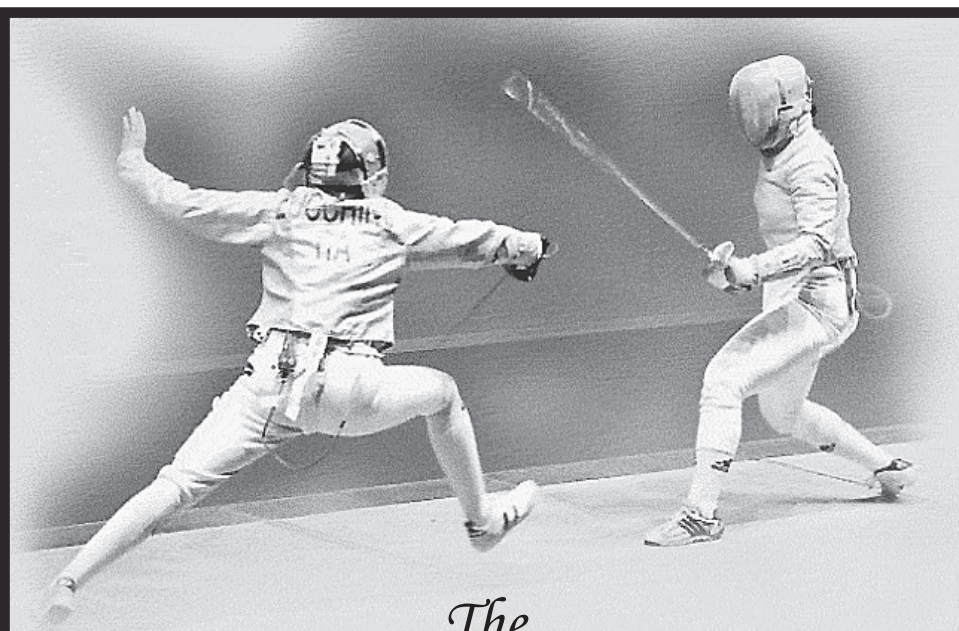




The
Sebastiani Fencing Academy
of Princeton, NJ

ESTABLISHED 2000

Register now for our
SUMMER PROGRAMS

July 11th ~ July 15th

All ages: Children to Adults

All Levels: Beginner to Advanced Competitor

Instruction by

French Master Michel Sebastiani

US World Championship Juniors and Seniors Coach;
US Olympic Coach 1984 Michel Sebastiani and his Staff;
25 years Head Fencing Master at Princeton University;
Most famous fencing master in the US!

609-578-0765

www.sebastianifencing.com

The Sebastiani Fencing Academy C.E.P- PO Box 7314 – Princeton NJ 08543-7314 Tel:609-578-0765 / Fax:
609-356-0177 Email: sebastianifencing@comcast.net / www.sebastianifencing.com

Summer Camps 2011 REGISTRATION

JULY 11 - JULY 15 9AM - 3PM

send to: Sebastiani Fencing Academy PO Box 7314 – Princeton NJ 08543

Payment **\$695** must be mailed or Fax with this form. Credit cards accepted.

First Name:

Last Name:

Address:

City/State/Zip:

Home Telephone #: _____ Cell phone #: _____

Work Telephone #: _____

Birthdate (children): _____ Age: _____ School: _____

Name of Parent/Guardian:

Parent's Email address (Please print clearly)

Are you a Novice ? (never introduced to Fencing before) yes / no

Are you a Beginner? (two years of serious study or less) yes / no

Where have you learned fencing before ?

Have you fenced competitively ? _____ How long ?

_____ Where _____ ? USFA Ranking if

any: _____ Weapon: _____

In case of emergency call:

Insurance Company and Policy #:

Equipment order form if needed- we order the equipment that is right and safe for you !(To be sent with your Registration)

HAND: RH LH
WEAPON : FOIL SABER EPEE FENCING SHOES /SIZE _____ KNICKERS/ MEASURE WAIST _____
FENCING SOCKS /SIZE-----
JACKET: MEASURE AROUND CHEST: ----- MASK: MEASURE AROUND FACE -----
GLOVE MEASURE HAND AROUND PALM WITHOUT THE THUMB -----

CAMP DAILY SCHEDULE

For the very young campers (of any age, starting age 5), Introduce the sport of fencing through games, sword fighting, with lots lots of fun!! Also an introduction to the classical study of the Art of the French School of Fencing. Fundamentals (En Garde position, hand technique, foot-work, positions, offensive actions, defensive actions and rules. Physical training will blend running, calisthenics and specific exercises to develop coordination and improve strength. Daily games, running, matches will take place and of course, breaks with snacks!! / movies related to sword fighting ☺

For the more advance fencers: Lectures on the Theory of Fencing, learning or reviewing of the fundamentals (En Garde position, hand technique, foot-work, positions, offensive actions, defensive actions and rules in use all over the world.) At this point tactics will be approached in order to understand how to operate during a match, how to read the mind of the opponent, how to prevail. Physical training will blend running, calisthenics and specific exercises to develop coordination and improve strength. For this level, the camps will demand a substantial physical energy from our fencers. A friendly and fun atmosphere will help them to request more of it. The program is adapted to the level of fencing and physical expertise of each student, Friendly daily bouts will take place. Officiating will be discussed also. A competition will take place on the last day of the camp.

All campers will be given an official Academy
t-shirt the first day of camp

Sebastiani Fencing Academy Camp Medical Form

To comply with New Jersey State youth Camp laws and regulations, we ask you to complete and return this form **on or before** the first day that your child attends camp. He or she **will not be allowed** to participate in camp activities until this form has been completed. If you have more than one child participating in camp, please fill out a separate form for each child. All information will be kept confidential.

Name: Address: Home Phone: Work Phone: Emergency Contact Name: Physician's Name:

Insurance Company Name: Allergies (please list ALL, including food allergies): **Medications** *(please list all Rx/Non-Rx medications administered to your child on a regular basis):

**** Please request and complete medication administration consent form if your child requires medication during camp hours ****

I hereby give the Sebastiani Fencing Academy and its representatives the power to authorize and consent to the administration of emergency care by EMT or any other emergency services for my child if any emergency arises.

Age: DOB:Ht.Wt:

Cell Phone: Other Contact Number:

Emergency Contact Phone: Physician Phone:

Policy #/Group #:

Immunizations: Please list dates that your child received the following immunizations: (attach physician letter if the immunization is in process)

Immunization date of immunization ("Up to Date" is no longer sufficient)

Diphtheria Tetanus Polio Mumps Measels Pertussis Rubella

Please indicate any other conditions (medical, mental, physical, etc) that your child has:

_____	_____
_____	_____
_____	_____
_____	_____

Guardian) Signature (parent/Guardian) Print Name (Parent/