

# VOLLEYBALL SUMMER SKILLS CAMP

Name: \_\_\_\_\_

2<sup>nd</sup> Grade \_\_\_ 3<sup>rd</sup> Grade \_\_\_ 4<sup>th</sup> Grade \_\_\_ 5<sup>th</sup> Grade \_\_\_ (8:00-10:00)

6<sup>th</sup> Grade \_\_\_ 7<sup>th</sup> Grade \_\_\_ 8<sup>th</sup> Grade \_\_\_ (10:30-12:30)

T-Shirt Size: **Youth** - M L XL **Adult**- S M L XL

Parent/Guardian: I verify that my child has received a physical examination (2016-2017) and is able to participate in volleyball camp. I give permission for my child to be treated by the appropriate medical personnel for any illness/accident while at camp.

I can be reached by phone at: \_\_\_\_\_.

Please indicate any special medical problem (medicine, injury, and allergies), which we should be aware of:

\_\_\_\_\_

The undersigned (parent/guardian) understands that the volleyball camp will consist of physical activities that contain an inherent risk of physical injury and assumes the risk and releases the Waterloo Community School District #5, its coaches and employees and guest coaches from any and all liability for injury arising from the applicant's participation in practice. I hereby grant permission for my child to attend the skills camp. I affirm that my child is in good physical health and has health and accidental coverage.

Parent/Guardian Signature:

\_\_\_\_\_

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

For questions, contact Coach Crawford @ [acrawford@wcusd5.net](mailto:acrawford@wcusd5.net) or 618-719-4465. Please turn in money and waivers by May 9 to Coach Crawford at the high school, Coach Schwehr at the junior high, the Gardner Office, or Coach Esker at Rogers.

**Where: Waterloo High School Gymnasium**

**June 26, 27, 28, and 29**

**2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>, and 5<sup>th</sup> Grade: 8:00am-10:00am**

**6<sup>th</sup>, 7<sup>th</sup>, and 8<sup>th</sup> Grade: 10:30am-12:30pm**

**(Sign up your child for the grade level they will be entering during the 2017-2018 school year).**

**\$50.00 per player**

**(Includes T-shirt)**

**Make checks payable to Waterloo Volleyball.**

**For questions, contact Coach Crawford @ acrawford@wcusd5.net or 618-719-4465 Please turn in money and waivers by May 16 to Coach Crawford at the high school, Coach Schwehr at the junior high, the Gardner office, or Coach Esker at Rogers.**

**GO BULLDOGS!!!!!!!!!!!!!!!!!!!!!!!!!!!!**