



# GHS VOLLEYBALL Camp



Are you interested in playing volleyball? Do you want to learn more about the game? Come join us for **CAMP** at Grayson High School! GHS Volleyball Camp is for any 3rd-8th grade girl in the Grayson cluster who is interested in learning the fundamentals of volleyball. Complete the form below and return it to Grayson Community School to register for camp. We are excited about YOU joining us!!

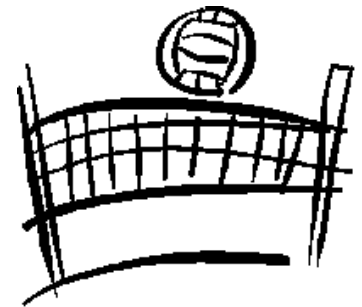
**Who:** Any 3rd-8th grade student interested in developing their volleyball skills

**What:** Grayson Junior Volleyball Camp

**When:** April 17, 19, 24, and 26 from 4:45-6:45

**Where:** Grayson High School Main Gym

**Cost:** \$75



**\*\*Tryouts for the 2018-19 volleyball middle school and high school teams will be THIS MAY!!! May 1-4, 2018. To find out more info about our programs and tryouts visit : [graysonvolleyball.com](http://graysonvolleyball.com)**



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**Registration Form**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Current Grade: \_\_\_\_\_

School: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact Name/Number: \_\_\_\_\_ / \_\_\_\_\_

Allergies, medication, limitations: \_\_\_\_\_

DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Cash or Check: # \_\_\_\_\_

**Payment may be made by cash or check Paid with: CASH or CHECK and made payable to: Grayson Community School**

Waiver of Liability: I/We the undersigned hereby certify that I (we) am (are) the parent(s) or legal guardian(s) of the athlete. I (We) hereby give permission for the Volleyball Training Staff to seek appropriate medical attention for the athlete and for the medical attention to be given and for the player to receive medical attention in the event of accident, injury or illness. I will be responsible for any and all costs of medical attention and treatment. I/We, the undersigned for ourselves, our heirs, executors and administrators waive, release and forever discharge Grayson High School and Staff, its staff, officers, directors, board members, coaches, agents, employees, representatives and successors and assigns of and from all rights and claims for damages, injury or loss to person or property which may be sustained or occur during participating in volleyball activities, whether damages, injury or loss are due to negligence. I/We hereby acknowledge that our child is physically fit and mentally capable of participating in volleyball and volleyball related activities.

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