

LAKELAND COLLEGE

# VOLLEYBALL SUMMER CAMPS 2011

## REGISTRATION FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Emergency Phone \_\_\_\_\_

Grade 2011-12 \_\_\_\_\_

School \_\_\_\_\_

Position: S OH MH RS DS/L

T-Shirt Size: S M L XL

E-mail Address \_\_\_\_\_

(REQUIRED FOR REGISTRATIOIN CONFIRMATION)

### CAMP

(please check one) All camps will run from 9AM-3PM. Lunch at the Lakeland College cafeteria and a camp gift will be included in the cost. All camps will be held on the Lakeland College Campus.

#### Varsity Team Camp \$125

\*\*High school varsity-level team of 8 or more.  
Sign up with your team for this camp format\*\*  
Varsity camps will be coached by Chad Schreiber and other Lakeland staff and team members.

August 1 - 4

August 8 - 11

#### Individual Skills Camp \$125

Individual Camps will be coached by members of the Lakeland team and staff.

July 25 - 28 \*\*Individuals in 7th - 9th grade only\*\*

August 8-11 \*\*Individuals in 9th - 12th grade only\*\*

I understand the directors, coaches, or anyone else connected with the Lakeland Volleyball will NOT assume any responsibility for accidents, medical, dental, or any other expenses incurred as a result of accident during, or as a result of, any course of instruction given the applicant by the staff. I will be financially responsible for all medical claims for my child in case of emergency. I hereby give my permission to the physician selected by Lakeland College to secure proper treatment for my child.

Parent Signature: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Full camp fee is due with application.

Registration deadline is July 11th or until the camps are full.

Send checks payable to Lakeland College Volleyball. Send registration form and check to:  
Lakeland College Athletics c/o Volleyball, PO Box 359, Sheboygan, WI 53082

