

The 2010 San Ramon Valley Volleyball Camps

Staff will include San Ramon coaches, college and high school varsity athletes

Youth Camp

- Who: Intended for youth ages 8-14 seeking an introduction to the fundamentals of competitive volleyball.
- What: Instruction in fundamental volleyball skills: forearm passing, overhead passing, setting, serving & spiking. Fun and competition applying skills. Camp t-shirt included.
- When: Session 1: Monday, July 19 – Thursday, July 22, 3:00 to 5:30 each afternoon
Session 2: Monday, July 19 – Thursday, July 22, 6:00 to 8:30 each evening
- Where: San Ramon Valley High School auxiliary gymnasium
- Cost: \$130 each session (checks payable to SRVHS Girls Volleyball)
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Skills Camp

- Who: 7th Grade through High School age athletes seeking to improve volleyball skills.
- What: Instruction in fundamental skills, advanced techniques, drills and competitive play. Athletes will be grouped by skill level. Camp t-shirt included.
- When: Session 1: Monday, August 2 – Thursday, August 5, 3:00 to 5:30 each afternoon
Session 2: Monday, August 2 – Thursday, August 5, 6:00 to 8:30 each evening
- Where: San Ramon Valley High School auxiliary gymnasium
- Cost: \$130 each session (checks payable to SRVHS Girls Volleyball)
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Tune-up Camp

- Who: Athletes seeking competitive play to prepare for high school tryouts.
- What: Advanced techniques, drills and competitive play.
- When: Session 1: Monday, August 9 – Thursday, August 12, 3:00 to 5:30 each afternoon
Session 2: Monday, August 9 – Thursday, August 12, 6:00 to 8:30 each evening
- Where: San Ramon Valley High School auxiliary gymnasium
- Cost: \$130 (checks payable to SRVHS Girls Volleyball)
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- ✓ Mail registration form and payment to Tom Bauhs, 540 Navajo Place, Danville, CA 94526 to reserve space. Registrations will be capped at 32 for each camp session.
- ✓ Walk-in registration until camp is filled. Bring completed registration form and \$130 payment (make checks payable to SRVHS Girls Volleyball) to first day of camp.
- ✓ Questions? Call 925-838-7595 or email tbauhs@sbcglobal.net

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Registration Form & Parent/Student Consent and Waiver of Liability

Camp (circle session): Youth 1 Youth 2 Skills 1 Skills 2 Tune-up 1 Tune-up 2

Participant Name: _____ Address: _____

Parent Phone # : _____ Emergency Phone # : _____

Age: _____ School: _____ Grade in school fall of 2010: _____

T-shirt size (circle): Youth S Youth M Youth L Adult S Adult M Adult L Adult XL

List any medical considerations: _____

Insurance Carrier: _____ Policy #: _____

I hereby give my consent for the above named minor to compete and participate in the above referenced Camp. I, the undersigned, hereby release and discharge both the organizers and operators of the "Camp" and the San Ramon Valley Unified School District, their officers, employees, agents, servants and volunteers (herein collectively referred to as "Camp/District") from all liability arising out of or in connection with the above described activity or all liabilities associated with any and all claims related to such activity that may be filed on behalf of or for the above named minor. For the purposes of this agreement, liability means all claims, demands, losses, causes of action, suits or judgments of any and every kind that occurs during the above described activity and that results from any cause including the active or passive conduct and/or negligence of the Camp/District.

I acknowledge on my behalf and on the behalf of the above named minor that there are risks that are inherent in the above-described activity, including the risk of serious injury that may occur through the conduct of other participants, coaches, Camp/District, including conduct that may not be part of the ordinary risks of the activity itself. For example, injury may occur through conduct that is not authorized by the rules and regulations of the activity. This release and waiver as set forth in the above paragraph shall also apply to this type of conduct and any resulting injury.

I also represent that the above named participant has undergone a medical examination by a licensed physician within one year preceding the date this document is signed, is in good health, and fully able to participate in the activities provided by the camp, including activities which are strenuous in nature.

I have carefully read this waiver and release of liability and fully understand its terms and conditions and understand that by signing this document that I have given up substantial rights for the named participant/minor and myself.

Parent/Guardian Signature **Date**

Parent/Guardian Name (Print)

Participant Signature **Date**
