

SHEBOYGAN YMCA

812 Broughton Dr, Sheboygan, WI 53081
P 920-451-8000 • F 920-451-8019
www.sheboygancountyyymca.org



GIRLS VOLLEYBALL CAMP
AUGUST 7 - 9, 2017

Freshman Girls in Fall 2017

This is a comprehensive camp for incoming freshman girls. Concepts will include basic fundamental training, volleyball strategies, skill drills, position-specific training, team-building games, volleyball systems and a t-shirt. The camp is limited to the first 24 registrants and it will fill fast, so register early! **The registration deadline is July 24, 2017.**

GIRLS VOLLEYBALL CLINIC
SATURDAY, AUGUST 19, 2017

Girls in Grades 6 - 8 in Fall 2017

This is a comprehensive clinic for middle school girls. The focus is on fundamental techniques and also includes skill drills, individual instruction, strategies, systems, fun team-building activities, a t-shirt and pizza lunch. The clinic is limited to the first 30 registrants and it fills fast, so register early! **The registration deadline is August 7, 2017.**

Camp meets:
Monday - Wednesday
6:00pm - 8:00pm



Clinic meets:
Saturday
9:00am - 2:00pm



SHEBOYGAN YMCA 2017 SUMMER GIRLS VOLLEYBALL CAMP AND CLINIC

Please return to the Sheboygan YMCA, 812 Broughton Dr, Sheboygan, WI 53081 | 920-451-8000

Name _____ Birth Date _____ Grade _____ F
Address _____ City _____
State _____ Zip Code _____ Phone 1 _____ Phone 2 _____
School _____ Email _____

HOLD HARMLESS AGREEMENT

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for my child to participate and be photographed in YMCA activities.

Parent Signature _____ **Date** _____

- Volleyball Camp 17SU-1YCAMP..**
 \$29.00 YMCA Family Member
 \$34.00 YMCA Youth Member
 \$49.00 Participant

- T-Shirt Size**
 Youth Large
 Adult Small
 Adult Medium
 Adult Large

- Playing Position**
 Unknown
 Setter
 Hitter
 Defensive Specialist

- Volleyball Clinic 17SU-1YCLINIC..**
 \$27.00 YMCA Family Member
 \$31.00 YMCA Youth Member
 \$45.00 Participant

- T-Shirt Size**
 Youth Large
 Adult Small
 Adult Medium
 Adult Large

- Playing Position**
 Unknown
 Setter
 Hitter
 Defensive Specialist

Receipt # _____ Amount Paid _____ Rec'd By _____ Date _____