

Edgewood Volleyball Camp 2017



June 26th - 29th

COST: \$50
WHO: Grades K thru 8th (Fall 2017)
TIME: 6:00pm - 8:00pm
**WHERE: Edgewood High School Gym
(Entrance 4)**

Every camper will receive a camp T-shirt!

EHS VB 2017 Camp Registration Form

CAMPER'S NAME: _____

GRADE (FALL 2017): Kindergarten 1st 2nd 3rd 4th 5th 6th 7th 8th

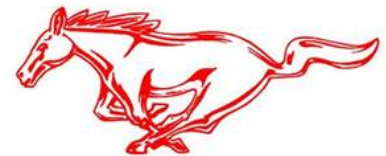
PARENT'S NAME: _____

PARENT'S CONTACT NUMBER: _____

T-SHIRT SIZE (Circle one): YS YM YL AS AM AL AXL

Send Forms And Payment To: MISTY EDWARDS
5925 S. Catherine St.
Bloomington, IN 47403

Make Checks Payable To: EDGEWOOD HIGH SCHOOL
(Memo: VB Camp)



Waiver And Release

I, hereby authorize the coaches of Edgewood Volleyball camp to act for me according to their best judgement in any emergency requiring medical treatment. I, hereby waive and release the camp and any of its employees or volunteers from any and all liability from any injuries and illness incurred at camp. I will be responsible for any medical and/or other charges in connection with attendance at camp. My son/daughter is covered by:

Parent/Guardian Signature: _____

Date: _____

For additional information please email Misty Edwards @ mist_e213@yahoo.com