



ATTENTION GIRLS & BOYS AGES 10 – FRESHMAN ANNUAL LADY PANTHER YOUTH CAMP VOLLEYBALL SUMMER CAMP



INSTRUCTORS: NPHS Volleyball Girls & Coaches

FRESHMEN: JULY 5TH – 8TH 12:00 – 3:00 PM
>> *INCOMING FRESHMEN ONLY* <<

SESSION 2A: JULY 19TH – 22ND 12:00 – 2:00PM

SESSION 2B: JULY 19TH – 22ND 3:00 – 5:00PM
>> *OPEN TO ALL AGES – 10 TO FRESHMEN* <<

TAKE ADVANTAGE OF EARLY REGISTRATION DISCOUNTS!

INCOMING FRESHMEN SESSION:	\$75.00	(AFTER JULY 1:	\$85.00)
SINGLE SESSION:	\$80.00	(AFTER JULY 1:	\$90.00)
TWO SESSIONS:	\$150.00	(AFTER JULY 1:	\$170.00)

SNACKS WILL BE AVAILABLE FOR PURCHASE. BRING WATER & WEAR TENNIS SHOES.

LOCATION: NPHS Gym, 456 N. Reino Rd, Newbury Park

FOR MORE INFORMATION:

Call: (805) 499-8068 / Email: summercamp@blackcatvolleyball.com / Check our website: www.blackcatvolleyball.com

2010 SUMMER VOLLEYBALL CAMP REGISTRATION FORM

CAMPER'S NAME _____ PARENT'S NAME _____

EMAIL _____ CELL # _____ HOME # _____

STREET ADDRESS _____ CITY _____ ZIP CODE _____

AGE _____ BOY _____ GIRL _____ T-SHIRT SIZE (YOUTH: M or L; ADULT: S M or L) _____

(REGISTER EARLY TO GUARANTEE A T-SHIRT)

DATES/SESSION ATTENDING:		<u>Before July 1st</u>	<u>After July 1st</u>
FRESHMEN: July 5 th – 8 th	12:00 – 3:00 PM	\$ 75.00 _____	\$ 85.00 _____
SESSION 2A: July 19 th – 22 nd	12:00 – 2:00 PM	\$ 80.00 _____	\$ 90.00 _____
SESSION 2B: July 19 th – 22 nd	3:00 – 5:00 PM	\$ 80.00 _____	\$ 90.00 _____
Two Session Special:		\$150.00 _____	\$170.00 _____

WAIVER & PROGRAM PARTICIPATION

The undersigned hereby agrees to defend, indemnify, and hold harmless the Newbury Park High School (NPHS) and Newbury Park High School Girls Volleyball Booster Club and its officers, and agents against any and all losses, liability charges, and expenses (including attorney fees), and costs which may arise by reason of participation in this program. (NPHS does not provide accident, medical, liability, workers' compensation insurance, or any insurance for program participants.) As a parent/guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury. I agree to pay any and all costs incurred as a result of said treatment. I agree to carefully inspect and satisfy for myself that the facilities provided are reasonably safe for their intended use. Once having conducted the inspection, I agree to expressly assume the risk of participation at the premises. I understand the NPHS Girls Volleyball Booster Club retains the right to use photos taken during activities for publicity purpose.

Signature (Parent/Guardian) _____ Date: _____

SIGNATURE REQUIRED TO PROCES REGISTRATION

MAKE CHECKS PAYABLE TO: **NPHS GIRLS VOLLEYBALL BOOSTERS CLUB** NON PROFIT I.D. **23-7035339**

MAIL CHECK & REGISTRATION FORM TO: **c/o Debi Welsh, 3039 Michael Drive, Newbury Park CA 91320**