

CAMP REQUEST FORM

SPORT: Volleyball DATES OF CAMP: 9/7, 9/14, 9/21, 9/28

WHO IS ELIGIBLE?

AGE/GRADE OF PARTICIPANTS: Grade School 1st - 8th

NORTON ONLY OR OTHERS: Norton kids

HOW WILL THE CAMP BE ADVERTISED? Flyers and word of mouth
(Please attach a copy of the camp brochure/flier)

COST: ~~\$50~~⁰⁰ for 4 Saturday mornings

COMPLETE THE FOLLOWING:

*COST BREAKDOWN PER CAMPER

T-Shirt/Jersey	_____	Instruction	_____
Refreshments	<u>\$10.⁰⁰</u>	Advertising	<u>\$10.⁰⁰</u>
Prizes	_____	Additional Costs	_____
Total	<u>\$20.⁰⁰</u>		

*NAMES OF COACHES/INSTRUCTORS:

Christine Walker, Jillian Coy, Jason Bryan

*SALARY BREAKDOWN OF COACHES/INSTRUCTORS:

Norton coaches are donating their time to help build our program


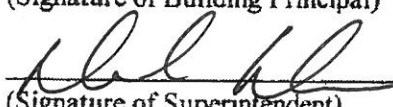
The following should be included in your camp brochure/flier:

*A SPECIFIC TIME SCHEDULE FOR EACH DAY

*OBJECTIVES

*FACILITY USE - PLACES, DATES AND TIMES

(Note: Outside groups must complete facility use form and provide liability insurance)

Christine Walker	8/13/13
(Signature of Sponsor)	(Date)
	<u>8/14/13</u>
(Signature of Athletic Director)	(Date)
_____	_____
(Signature of Building Principal)	(Date)
	_____
(Signature of Superintendent)	(Date)

Norton Volleyball Kids September Saturday Camps

Volleyball for Grades 1 through 8

DATES: 4 Saturday mornings in September
Starting Sept 7th, 8 am to 10 am

1st through 3rd graders will use a 7.5 ounce First Touch volleyball. Soft to the touch.
4th through 5th graders will use a Volleyleite. This is not as heavy as a regular volleyball.
6th through 8th graders will use a regulation volleyball.

Where:

Norton City Schools High School Gym

Camp Fees:

Cost is \$20 per camper

Make checks payable to: **Norton Volleyball**

Registration:

Mail or drop off registration forms with camp fee to:

Norton Volleyball, Jason Bryan
4128 Cleveland Massillon Road
Norton, Ohio 44203

You may also register the first day of camp on September 7th

Questions?

Call or text Coach Walker with any questions at 330-338-5550. Thank you!

Please return the registration form below, along with payment to reserve your spot:

2013 NORTON VOLLEYBALL KIDS SEPTEMBER SATURDAY CAMPS

Registration / Medical Release Form (Please Print Clearly)

Participant's Name: _____

Parent's Names: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

School Attending: _____ Grade: _____

Parent's Email Address: _____

I give my child, _____, permission to participate in the Norton Volleyball Kids Camp.
I understand that Norton City Schools, the Norton volleyball staff or volunteers, will not be held liable for injury, accidents, or illness sustained during or as a result of any course of instruction or game play.

Parent/Guardian signature: _____ Date: _____