

CAMP REQUEST FORM

SPORT: Volleyball DATES OF CAMP: July 8, 9, 10, 11, 2024

WHO IS ELIGIBLE?

AGE/GRADE OF PARTICIPANTS: Gr. 3 - 7th

NORTON ONLY OR OTHERS: Others

HOW WILL THE CAMP BE ADVERTISED? camp flier distributed by schools, + Facebook Volleyball page / PPABC Facebook
(Please attach a copy of the camp brochure/flier)

COST: \$50.00

COMPLETE THE FOLLOWING:

*COST BREAKDOWN PER CAMPER

70 campers x 8.50 = \$595		
T-shirt/Jersey	<u>\$8.50</u>	Instruction
4 cases (100) x 10.00 = \$40.00		
Refreshments	<u>\$0.57</u>	Advertising
Prizes		Additional Costs
Total	<u>\$9.07</u>	

*NAMES OF COACHES/INSTRUCTORS:

<u>Leslie Flohr</u>	<u>Katie Zollinger</u>	<u>Madison Burns</u>	<u>Gretchen Kovein</u>
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*Varsity players

*SALARY BREAKDOWN OF COACHES/INSTRUCTORS:

N/A →

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)

Leslie H. Flohr
(Signature of Sponsor)

5/1/24
(Date)

[Signature]
(Signature of Athletic Director)

5/2/24
(Date)

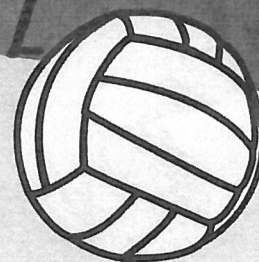
[Signature]
(Signature of Building Principal)

(Date)

(Signature of Superintendent)

(Date)

NORTON VOLLEYBALL YOUTH CAMP



COST: \$50 per athlete (checks payable to Norton City Schools: Norton Volleyball on memo line)

WHEN: July 8-11

WHERE: Norton High School Gym

WHO: SESSION ONE:

Girls entering 3rd-5th

8:30-10:30 am

SESSION TWO:

Girls entering 6th-7th

11:30 am-1:30 pm

Jump, set, spike! It's volleyball time! This camp focuses on developing fundamental skills in passing, setting, spiking, blocking, and serving as campers build knowledge of the rules of the game. Campers will experience a small player to coach ratio as they work closely with current coaches of the Norton Volleyball program as well as past and current members of the varsity team.

T-SHIRT INCLUDED!

Questions: please contact Head Coach Leslie Flohr lflohr@nortonpanthers.org

Registration Form

Camper's Name: _____ Grade Level/Session _____

Guardian's Name: _____

Guardian's Phone: _____ Email: _____

T-shirt Size: _____YM _____YL _____AS _____AM _____AL _____AXL

I hereby give my child permission to participate in the Norton Volleyball Youth Camp. I, the below signed parent or guardian, permit my child to participate in the camp activities and will be responsible for insurance coverage in case of injury.

Parent/Guardian Signature

Date

*Please register by mail by sending form to Athletic Office c/o Leslie Flohr; Norton High School 1 Panther Way Norton, 44203