

**2011 Camp  
Registration Form**

Camper Name \_\_\_\_\_

Parent Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ T-Shirt—XL L M S

Home Phone: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Ball Control Skills Clinic (June 24-25) \$65.00

All Skills Camp (June 26-28) \$110.00

Advanced Attack Camp (June 29-July1) \$110.00

**Total Amount Due:** \_\_\_\_\_

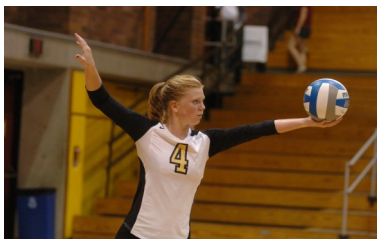
Mail this registration form, medical waiver and fees to:

Tom Shoji  
Head Volleyball Coach  
Willamette University  
900 State St.  
Salem, OR 97301

Checks payable to: **Willamette University Volleyball**

Medical waiver must be signed by parent/guardian and on file before being allowed to participate.

Registration deadline is June 21st for all camps.



Willamette University  
Department of Athletics  
900 State St.  
Salem, OR 97301



**SUMMER 2011  
Bearcat Camps**



## Ball Control Skills Camp June 24 & 25



June 24 & 25 8<sup>th</sup> – 12<sup>th</sup> grades  
 Henkle Fieldhouse – Willamette University  
 Cost: \$65.00

Friday	June 24	8:30am	Check-in
Friday	June 24	9:00 – 11:30	Lunch on own
		1:30 – 4:00	
Sat.	June 25	9:00 – 11:30	Lunch on own
		1:30 - 4:00	

The clinic is designed to teach techniques to help improve a player's ball control skills. Serve/Receive passing, defensive digging and emergency defensive skills will be emphasized. Players will be grouped according to skill level.

The clinic will also include sessions on serving and overhead passing. This camp is open to JV and Varsity players.



## All Skills Camp—June 26—28

June 26 – June 28 5<sup>th</sup> – 8<sup>th</sup> grades  
 Henkle Fieldhouse – Willamette University  
 Cost: \$110.00

Sunday	June 26	1:00pm	Check-in
Sunday	June 26	1:30 – 4:00	
Monday	June 27	9:00 – 11:30	Lunch on own
		1:30 – 4:00	
Tuesday	June 28	9:00 – 11:30	Lunch provided
		1:30 – 4:00	

This camp will teach the fundamental skills of volleyball using clear and precise techniques for each skill. Campers will be grouped according to ability and experience. Geared toward middle school players.

This camp is designed to quickly build understanding of the game for beginners and also to challenge those who might have more experience.

## Advanced Camp June 29–July 1



June 29—July 1 8<sup>th</sup>—12<sup>th</sup> grades  
 Henkle Fieldhouse—Willamette University  
 Cost: \$110.00

Wed.	June 29	8:30am	Check-in
Wed.	June 29	9:00 – 11:30	Lunch on own
		1:30 – 4:00	
Thurs.	June 30	9:00 – 11:30	Lunch provided
		1:30 – 4:00	
Fri.	July 1	9:00 – 11:30	

This camp will teach the advanced skills of hitting, blocking and serving using distinct techniques for each skill. Players will be grouped according to ability and experience.

The camp is designed to teach techniques that will help in the attacking phase of the game for junior varsity and varsity players. Different types of sets will be taught and the jump serve will be demonstrated, practiced and perfected.

Instruction will also be given in the challenging skill of blocking. Numerous effective techniques will be used in helping you become a successful blocker.



## RELEASE AUTHORIZATION: EMERGENCY TREATMENT

I understand that I am required to maintain and carry accidental medical insurance coverage for the participant listed on this application and I verify that the coverage information attached herewith is accurate and true. This required coverage will be in full effect while participating in the program. In case of any emergency, I authorize the staff of Willamette Volleyball Camps to obtain whatever medical transport and/or treatment necessary for the welfare of the participant listed on this application. All charges and fees incurred in the rendering of transport or treatment is my responsibility. I am the authorized parent guardian of this minor: \_\_\_\_\_

And I am legally authorized to sign this release on their behalf.

Parent/Guardian Signature Date \_\_\_\_\_

Insurance Carrier Policy Number \_\_\_\_\_

## WAIVER OF LIABILITY, ASSUMPTION OF RISK, and INDEMNITY AGREEMENT

**Waiver:** In consideration of being able to participate in any way in Willamette University's Volleyball Camps, I, for myself, my heirs, personal representatives or assigns, **do hereby release, discharge, waive, and covenant not to sue** the Willamette University, doing business as Volleyball Camps, its board, officers, employees and agents from liability **from any and all claims on Willamette University and it's Volleyball Camps, its board, officers, employees, and agents**, resulting in personal injury, accidents or illnesses (including death) and property loss arising from, but not limited to participation in Willamette University's Volleyball Camps.

**Assumption of Risks:** Participation in Willamette University's Volleyball Camps carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks range from 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

I have read the previous paragraph and I know, understand, and appreciate the repercussions of these and other risks inherent in Willamette University's Volleyball Camps. I hereby assert that participation is voluntary and that I knowingly assume all such risks.

**Location-**This waiver, assumption of risk and indemnity applies to any activity or action that takes place while being transported or located related to Willamette University's Volleyball Camps. This waiver, assumption of risk and indemnity is in effect at anytime myself, the participant, are present on campus or in any location associated with Willamette University's Volleyball Camps.

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY and HOLD Willamette University and it's Volleyball Camps HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorneys fees brought as a result of involvement with the camp and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of Oregon and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Acknowledge of Understanding:** I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily and my signature is a complete and unconditional release of all liability to the greatest extent of the law.

Parent/Guardian Signature Date \_\_\_\_\_