

COACH MCGUIRE'S VOLLEYBALL CLINIC
2018

Clinic will focus on the instruction of fundamental skills such as passing, serving, hitting, receiving and setting. Players will learn positions, offense, defense and teamwork. Awards will be presented to the "STAR" passer and "STAR" server of the clinic per session. Athletes will be expected to display good sportsmanship and proper attitude at all times.

Please choose from one of the following two sessions: (grades shown below signify the grade your daughter will enter in August 2018)

July 16-20:

- () 9:00am - 12:00pm Grades 4 & 5
- () 1:00pm - 4:00pm Grades 6, 7, & 8

Athletic attire is required which includes athletic shoes, athletic attire, and kneepads. Please have your daughter wear her hair in a ponytail, if appropriate.

Clinic will run Monday through Friday at a cost of \$80.00 for 1 student, \$150.00 for 2 students, or \$210.00 for 3 students. The cost of the clinic also includes a T-Shirt. Space is limited. Please return this form along with a check made payable to Amy McGuire to the school office in an envelope labeled Coach McGuire's Volleyball Clinic.

CHILD'S FULL NAME _____

ENTERING GRADE _____ IN AUGUST AGE _____

T-SHIRT SIZE (CIRCLE ONE):
YOUTH - S M L
ADULT - S M L

PARENT INFORMATION: (please print)

MOTHER _____ PHONE _____

FATHER _____ PHONE _____

PARENT E-MAIL _____

PERSON TO CONTACT IN CASE OF EMERGENCY

NAME _____ PHONE _____

List any special medical problems we should be aware of:

PARENTAL CONSENT: The undersigned parent or guardian understands that the applicant will be engaging in activities that may result in physical injury. St. Joseph School, its directors, and employees will be released from any and all liability from personal injury. I hereby give permission for my daughter to participate in Coach McGuire's Volleyball Clinic and be treated by a licensed physician in the event of injury. I hereby give my permission for emergency treatment in the event that I cannot be reached. Furthermore, I agree to pay for any and all services provided.

Parent/Guardian Signature

Date