

# 2016 Lady Roos Volleyball Camp June 6-8

## Time and Place:

June 6-8 (Mon.-Wed.)  
Ninth Grade Center Activity  
Center

**Session I:** 8:30 am – 10:30 am  
Incoming 3<sup>rd</sup> – 6<sup>th</sup>  
Cost: \$65

**Session II:** 8:30 am – 11:00 am  
Incoming 7<sup>th</sup> – 8<sup>th</sup>  
graders  
Cost: \$75

**Session III:** 12:00 pm – 3:00 pm  
Incoming 9<sup>th</sup> Graders  
Cost: \$85



## Camp Fee Includes:

- Gym usage fee
- Camp T-Shirt
- Contest Awards

## What to Bring:

- Practice Clothes (shorts or spandex, t-shirt, knee pads, non-marking athletic shoes)
- Money for concession stand – they will get breaks to buy food & drinks
- A GREAT ATTITUDE!!!

## Camp Staff

The camp staff will consist of High School volleyball coaches from the Weatherford School District.

## Lady Roo Volleyball Camp Philosophy

The goals of this camp are to teach and enhance the skills and knowledge of volleyball on an individual level. Focus will primarily include fundamentals on passing, setting, hitting, and serving skills and team concepts involving offense and defense. We expect each camper to gain a greater knowledge of positions, accurate techniques, offense, defense, and of course love for the sport along with added self-confidence.

**Registration will only be at the door. Faculty kids will only pay the cost of the shirt of \$15. All campers please bring this form and your cash or check made out to Natalie Gonzales. For more information email Coach Gonzales at [ngonzales@weatherfordisd.com](mailto:ngonzales@weatherfordisd.com)**

**\*\*\*Camp fee is non-refundable\*\*\***

## Please Print:

Camper's Name: \_\_\_\_\_ Grade for 2016 -17 school year: \_\_\_\_\_

Session attending: \_\_\_\_\_ T-Shirt size (circle one): YS YM YL AS AM AL

Parent/Guardian (print) \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Emergency Phone (if different) \_\_\_\_\_

**Waiver of Claims:** I, as a parent or legal guardian, hereby give permission for my child to participate in the WHS Volleyball Camp, and acknowledge the fact that she is physically able to participate in activities. I hereby authorize the camp staff to act for me accordingly to their best judgment in any emergency requiring medical attention. I fully understand that I will be responsible for any cost (through family medical insurance or otherwise) required due to sickness or injury to my daughter. I hereby waive any claim I might have against the coaching staff and/or Weatherford Independent School District.

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