

# The Volleydome's VOLLEYBALL ACADEMY

## Fall 2010 - For Beginning Volleyball Athletes grades 4-9

### My Registration

Name of Participant \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Postal Code \_\_\_\_\_ Birth Date Month/Day/Year \_\_\_\_\_ AB Health \_\_\_\_\_

Name Parent/Guardian \_\_\_\_\_

Phone #H \_\_\_\_\_ #W \_\_\_\_\_ #C \_\_\_\_\_

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

- Please ✓  **Group A: Grade 4-7 Boys & Girls** Tuesdays: 4:45 to 6:15 & Sundays 1:30 to 3:00 Sept. 7 to Oct. 5
- Please ✓  **Group B: Grade 4-7 Boys & Girls** Thursdays: 4:45 to 6:15 & Sundays 1:30 to 3:00 Sept. 7 to Oct. 5
- Please ✓  **Group C: Grade 8-9 Boys OR Girls** Tuesdays: 4:45 to 6:15 & Sundays 12:00 to 1:30 Sept. 9 to Oct. 7
- Please ✓  **Group D: Grade 8-9 Boys OR Girls** Thursdays: 4:45 to 6:15 & Sundays 12:00 to 1:30 Sept. 9 to Oct. 7

**Program Cost: \$101** (includes t-shirt)

Pay by: Visa / Amex / MC / Cash / Cheque payable to Volleydome

Card # \_\_\_\_\_ Exp. \_\_\_\_\_ Name on Card \_\_\_\_\_

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### Consent Form - Please Read Carefully and Sign;

The applicant understands that risk is inherent in any physical activity and agrees that the Volleydome and/or any individual connected with them will not be held responsible for any accidents, injury, damage or loss however caused.

By registering for a camp with Volleydome Volleyball Academy, I, \_\_\_\_\_ accept personal responsibility for my participation in any activities and I agree to do so at my own risk.

I, the parent or guardian \_\_\_\_\_ understand that every attempt will be made to contact myself should any emergency medical treatment or services occur. In case I am unable to be reached, I authorize \_\_\_\_\_ Phone # \_\_\_\_\_ to act on my behalf as an emergency contact.

In the event that I or my alternate contact can not be reached, I give full consent for any licensed emergency service or medical personnel to provide treatment or service necessary to maintain the health of my child:

Signed \_\_\_\_\_ Date \_\_\_\_\_

*The Academy coaches reserve the right to request any applicant to withdraw from the camp prior to its termination, if in their opinion the applicant is not acting in a reasonable manner. The coaches also reserve the right to cancel or reschedule any session due to any unforeseen circumstances.*

*Volleyball Academy cancellations are accepted right up to the start date, but are subject to a \$10.00 administration fee.*

*No refunds after the 3rd session (because it's too late to replace you with others from the waiting list).*

**Send registration form and fee to: Volleydomes Corp. 2825 - 24th Ave. NW, Calgary, AB. T2N 4L6**

**Ph: 403 284-3663 Fax 403 289-6240 or email: dsaxton@volleydome.net**

**[www.volleydome.net](http://www.volleydome.net) (look under Youth Programs)**