



Future Warriors

Volleyball Camp 2024

August 7th & 8th

5:30pm - 7:30pm at Philomath High School

Join us for our 2-day Kids Camp focusing on skill development and basic understanding of the game. Camp is run by high school coaches and players.

Registration includes a camp T-shirt.

For any boy or girl entering 3rd - 8th grades in the Fall of 2024

What to Bring:

- Knee pads (if you have them)
- Water bottle
- Snack (if you'd like)
- Athletic shoes and attire

Cost:

- \$40 pre-registration (before August 5th)
- \$50 for day-of registration

Checks Payable to: **PHS Volleyball**

Contact:

Whitney Rasmussen with any questions at:

whitney.rasmussen@philomath.12.or.us

Day 1: Skill Development

- Passing
- Setting
- Serving

Fundamental skills include footwork, communication, rotations, and court knowledge.

Day 2: Hitting and Game Day

- Hitting introduction in small groups. Grouped by skill and ability.

- GAME TIME! Put all of the newly developed skills to the test with drills, games, and competitions to earn prizes.

Please return the completed form below (page 2) to the Philomath High School office on August 1st or after. Please enclose the \$40 registration and camp fee (\$50 after August 5th).

PHILOMATH SCHOOL DISTRICT ACTIVITY/SPORTS CAMP LIABILITY WAIVER— IDENTIFICATION FORM
— INSURANCE INFORMATION

The purpose of the warning is to bring to your attention the existence of potential dangers associated with participation in this sports camp or activity. Please read this information carefully and be aware that in signing up and participating in this activity, you will be expressly assuming all the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your child might sustain as a result of participating in any and all activities connected with this activity.

I recognize and acknowledge that there are certain risks of physical injury to participants in this activity, and I voluntarily agree to assume the full risk of any injuries, damages, or loss, regardless of the activity, that my child or I may sustain as a result of participating in any and all activities connected with or associated with this activity. I further agree to waive and relinquish all claims my child or I may have or accrue to me or my child as a result of participating in this activity against the Philomath School District, Philomath High School or anyone associated with this activity; including the officials, agent affiliates, volunteers, employees and sponsors.

I do hereby fully release and forever discharge the Philomath School District and Philomath High School including their officials, agents, affiliates, volunteers, employees and sponsors of any and all claims of injury, damages or loss that my child or I may have, or which may accrue to me or my child and arising out of, connected with, or in anyway associated with this activity.

I do hereby authorize the instructors of this camp to act on my behalf authorizing any reasonable and necessary medical care, including medicine, for the benefit of that child should the child become ill or injured during the time that the coaches or sponsors are supervising or working with my child during the camp, and if I, or the emergency contact listed below, are unable to be contacted at the listed phone numbers.

PARTICIPANT INFORMATION

Participant's Name: _____

Date of Birth: _____ **Grade:** _____

Address: _____

Parent / Guardian Phone #(s): _____

Does this child have any limitations, allergies, or other significant medical conditions?

Yes / No If yes, please explain: _____

Primary Doctor's Name and Phone Number: _____

Medical Insurance Program and ID#: _____

Signature: _____

Date: _____

(parent or legal guardian)

SHIRT SIZE: Circle one below

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