

Marcus Volleyball Camps

3rd – 6th, 9th Grade Camp
Date: July 22nd – 25th
Time: 8:30 – 11:30 am
\$100 per Camper

7th & 8th Grade Camp
Date: July 22nd – 25th
Time: 1:00 – 4:00
\$100 per Camper

Camper's name: _____

Grade entering in the Fall: (circle one)

3rd 4th 5th 6th 7th 8th 9th

School attending in the Fall: _____

Which camp will the camper be attending: (circle one)

3rd – 6th, 9th (morning) 7th & 8th (afternoon)

T-shirt size: (circle one)

Youth M Youth Lg Adult S Adult M Adult L Adult XL

Emergency Contact name: _____

Emergency contact number: _____

Emergency contact email: _____

“As parent/ legal guardian of above named girl, I grant permission for pictures to be taken by camp coaches and/or posted on camp social media accounts.”

_____ Agree

_____ Disagree

I understand there will be a concession stand offered and it will be **cash only**.
AND

As parent/ legal guardian of above named girl, I grant permission to participate in the Marcus volleyball camp and acknowledge that she is physically able to participate in camp activities. I also release LISD, Danielle Barker, and all camp employees from any and all claims, demands, and causes of action whatsoever resulting in participation in Marcus Volleyball Camp.

Parent Signature

Date

Make checks payable to Danielle Barker.
Mail this form and payment to:
Danielle Barker
4412 Spanish Oak Circle
Corinth, TX 76208