2018 Middle School Volleyball Refresher Clinic @ Indian Rocks Christian School

(Hosted by IRCS Head Coach Mark Foster)

Date:

Saturday, August 11

Time:

9:00-11:30am

Cost:

\$35 (Late Registration)

Girls entering 5th-8th grade (\$10 of each fee is non-refundable)

(Minimum of 10 campers required to host the clinic; 40 Maximum)

To Register: please send an email to Mark Foster@indianrocks.org

\$25 (Early Registration)





Please fill out the registration form on the back of this brochure and send in with a check made out to "Indian Rocks Christian" for the total

amount of the clinic:

\$25 - Early Registration *Register before August 4*

\$35 -Late Registration *Register after August 4*

*This clinic is for girls entering 5th-8th grade





Please send the registration form and check to the following address:

Indian Rocks Christian School c/o Mark Foster 12685 Ulmerton Road Largo, FL 33774

Contact Info: YTB Foster@yahoo.com Mark Foster@IndianRocks.org

Cell: 727-418-8874

PLAYER INFORMATION:

Name:		Grade:	Age:
Address:			
Home Phone:	Cell Phone:	Parent's Name:	
Emergency Contact	and Phone Number:		
Email:			
AUTHOR	RIZATION FOR MEDICAL RE	ELEASE AND RELEASE OF	LIABILITY
August 11 MS V emergency facility and pemergency at which time by ambulance if the situral Also, by allowing my chare inherent dangers are him/herself, as well as coundersigned is legally reconsideration of my child himself/herself, as well undersigned is legally reconsideration of my child himself/herself, as well undersigned is legally respectively in law or in specifically including the Rocks, Inc., Indian Rock volunteer, for any and a attending the activity or Finally, by signing below myself, my spouse, child	ild to attend the activity, the und risks in the activity, which can behalf of the undersigned's esponsible, hereby assumes. It being permitted to participal as on behalf of the undersignesponsible, hereby releases, in Rocks, Inc., Indian Rocks Crones and volunteers, from an equity (including attorney's force arising as a result of any laks Christian School, their age all injury, damage or loss, to proparticipating in any activities of any lake the participating in any activities of the participating in any activities o	ity"). I authorize and give my isary treatment to my child. In time is of the essence, I give andersigned recognizes and a dangers and risks the unders is spouse, children, ward and Consequently, it is understoute in the activity, the undersited's children, ward and othe discharges, indemnifies and hristian School, their agents, my and all claims, actions, delees and costs incurred in conalleged negligence of the Firents, employees, representation or property, arising direction in connection therewith.	consent to any in the event of an e my consent to transport acknowledges that there igned, on behalf of others for whom the od and agreed that in gned, on behalf of irs for whom the holds harmless the First employees, mands, or damages innection therewith), and st Baptist Church of Indiar ves, chaperones and ectly or indirectly from indianal am hereby binding
(Signature and Relation	ship to player)		
Print Name		DATE	