



TIGERS VOLLEYBALL CAMP @ Uxbridge Secondary School

Our 4 day Volleyball camp is designed to help learn essential rules, develop movement, body control, ball skills, spatial awareness, and teamwork through a fun mix of drills and playing time. This camp is a great opportunity for boys and girls from grades 4 to 8 to learn more about volleyball. Emphasis is placed on playing the game while providing natural progressions to learning new skills.

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| Print Last Name | Print First Name | Grade (as of June 2015) | Age |
| Home Phone Number () | Emergency Contact Person Name: _____ Phone: _____ | | |
| Home E-mail Address | | Name of School you are attending | |
| Medical Information | | | |
| Any medical conditions and/or allergies we should be aware of: | | | |
| Name of Doctor: | Phone Number of Doctor: | Health Card Number: | |
| Camp Dates: June 29 th ,& 30 th , July 2 nd & 3 rd , 2015 Time: 9 am to 12 pm | | \$125 Fee includes: camp t-shirt, volleyball, & prizes | |
| PLEASE CIRCLE ONE: | | | |
| T-shirt size: Youth: S M L XL | | | |
| Adult: S M L XL | | | |



Contract / Agreement

Please register my child for the Tigers Volleyball Camp 2015.

A parent / guardian must sign this contract.

- Cash / a cheque in the amount of \$125 must accompany this registration form. Please make cheque payable to **Tony Kiriakou**. Please write the camper's name on the cheque.
- Enrollment in the camp establishes permission for a child to engage in all camp activities except as noted by a parent and/or physician on the registration form.
- I have read and agree to the above.
- Registration form and payment for the camp is due by **June 26, 2015**.

Parent / Guardian Signature: _____ Date: _____

Please bring completed forms with payment to Tony Kiriakou, Office (Room 212).

To register or for more information, contact Tony @

Email: kiriakou_andony@durham.edu.on.ca

Work: 905-852-3391, ext. 265.

Cell: 416-476-7858