Carolina Volleyball Camp
at Croatan High School

Croatan High School is excited to announce that the Tar Heels are coming to the Crystal Coast! These camps are designed to help players develop and bring their individual skills to a higher level. These camps will train all aspects of the game and prepare the players for their upcoming school seasons. Bring a willing attitude to LEARN and to WORK HARD!

Monday, June 18 - Wednesday, June 20

Cost: $95  Make checks payable to CHS Volleyball  Form & payment due by Friday, June 8th.

This camp will fill up (max 36 campers per session), so please send in registration early! Payment must be sent with registration form.

Croatan High School #1 Cougar Lane, Newport NC, 28570 attn: Erica Heimforth

Questions? Contact Erica Heimforth, eheimforth@gmail.com

*Email Coach Heimforth if interested in camp near/after due date to see if space is available*

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<tr>
<th>Rising 9th and 10th graders</th>
<th>Rising 11th and 12th graders</th>
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<td>1:00 pm - 3:30 pm</td>
<td>9:00 am - 11:30 am</td>
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Carolina Volleyball Travel Camps 2018: REGISTRATION / WAIVER

Student's Name: _____________________________

Grade for 2018 - 2019: _______  School: _____________________  T-shirt size: AdultS  M  L  XL

Parents/Guardians: ____________________________________________________  Phone #: _____________________

email (please write clearly): ____________________________________________

WAIVER STATEMENT

I hereby permit my child to participate in all activities at the Carolina Volleyball Camp, located at: Croatan High School, Newport NC on JUNE 18-20, 2018.

My child/camper has her own medical coverage and I hereby give permission for the staff of the camp to seek appropriate medical attention for my camper during the period of the clinic/camp. I give permission for the medical attention to be given in the event of accident, injury or illness. I will be responsible for any and all costs of medical attention and treatment.

I understand that there may be some risks in connection with this activity and I hereby assume all of the risks and waive any claim that I may have against the Carolina Volleyball Camps, Inc., its agents or staff, and the hosting school and district, in connection with my child's participation in this event.

I further acknowledge that my child is covered by adequate health insurance, and that any medical expenses that my child may incur related to this activity are entirely my responsibility. The Carolina Volleyball Camps, Inc. provides only excess coverage after your insurance policy has been utilized. Campers will not be allowed to participate unless the following information is submitted and the form signed by the parent or legal guardian of the participant.

Parent/guardian signature _____________________________________________ Date __________

INSURANCE INFORMATION

Camper’s (Parent) Insurance Co. _______________________________________

Address and Phone ___________________________________________________

Policy Number _______________________________________________________

For Coach use only

Payment type: __________

Date received: __________