



Cardinal Volleyball Camp

Get ready for the 2017 Volleyball season with the Cardinal Volleyball Camp! All camp sessions are open to girls and boys and will cover the skills of volleyball and team strategy as applicable to each age group. Each day will include games and prizes!

Session 1: August 7-10th: 9:00-12:00; for incoming 3rd and 4th graders. \$90

Session 2: August 7-10th: 1:30-4:30; for incoming 5th and 6th graders. \$90

Session 3: August 22-25: 5:30-8:30; for incoming 7th and 8th grade. \$90
(Tuesday-Friday)

Camp Staff: The camp staff will include current and former high school and collegiate volleyball players from the area. Patty Jayne will be directing the camps. This is Coach Jayne's 12th year running the Cardinal Camp. She has over 30 years of playing, coaching, and officiating experience. She served as an assistant at Ohio State, and Oregon, and a head coach at Pacific University and University of Portland. She has been involved with the Columbia Empire Volleyball Association as a past board member and president, and has run and coached numerous club programs. She is currently the Physical Education teacher at St. Joseph. Coach Jayne holds a degree in Exercise Science and a Masters Degree in Physical Education.

A confirmation notice will be e-mailed (or mailed if e-mail not available) to each camper who completes the following form and returns it with \$90. This is a **non-refundable** registration fee.

For more information contact
Patty Jayne at 360-901-8353.

Or pattyj@stjoevan.org

Make check payable to St. Joseph CYO and send with the attached registration to: Patty Jayne

St. Joseph Catholic School
6500 Highland Drive
Vancouver, WA 98661

Cardinal Volleyball Camp Registration - 2017

PLEASE PRINT:

Participant's Last Name _____ First Name _____

e-mail _____ Grade entering fall 2017 _____

Birth Date ____/____/____ Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Work/Cell _____

Emergency Contact (other than parent) _____

Special Medical Concerns _____

Statement of Waiver: I, as a parent or guardian, hereby assume all risks and hazards incidental to the conduct of the activities. I release, absolve, and indemnify St. Joseph School, employees of St. Joseph School, volunteers, contractors and/or sponsors from all risks and hazards associated with the activities and in the event of injury, do expressly waive all claims against them. I further give permission for proper emergency care to be rendered to my child should I not be available or able to give such permission. As part of this approval, I acknowledge I may have the opportunity to review the premises, and equipment to be used in conducting the activity. I also have the opportunity to discuss with program organizers potential hazards and risks that may be associated with the activities and take responsibility for doing so. Failure to exercise this option indicates my approval and acceptance. Release: I hereby authorize the staff of the Cardinal Volleyball Camp to act for me according to their best judgment in any emergency requiring medical attention. I hereby waive and release the staff of Cardinal Volleyball Camp from any and all liability for any injuries incurred by my child while at camp. I have no knowledge of any physical impairment that would be affected by the above named child's participation in this camp.

Signature (parent or guardian) _____ Date _____

Youth Signature: _____ Date _____

By signing this form you agree that you have read and understand the statement of waiver and gym rules.

Please circle the appropriate session: 1 2 3