

# 2017 COVINGTON LADY BUCCS VOLLEYBALL CAMP



## **Registration Form**

Camp dates: July 24, 25, 26, 27 (9:00 - 12:00 and 1:00 - 3:00) - bring your lunch, drinks will be provided.  
Location: Covington competition gym - ( new gym)

**Questions contact: Lonnie Cain 937-573-8118,  
Lori Smith 937-541-8740 or Stephanie Robinson at 937-418-0421**

**Please print or type all information requested.**

NAME \_\_\_\_\_ grade level in August: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PARENTS NAME(S) \_\_\_\_\_

CELL PHONE #1: \_\_\_\_\_ CELL PHONE #2: \_\_\_\_\_

SHIRT SIZE: YS YM YL ADULT SIZES: AS AM AL AXL

Make checks payable to: **Covington Schools**

Return this registration form and \$20 to Mrs. Robinson, High School Secretary, by **May 26th** or mail to:

**Covington High School  
High School Volleyball Camp  
807 Chestnut Street  
Covington, Ohio 45318**

**(Form must be received no later than June 30th to insure a Camp T-shirt)**

\* all high school athletes need a physical form from a doctor **BEFORE** they can participate in any practice. Volleyball practice begins on August 1st. It would best to get this done **BEFORE** camp (July 24th) and turn in all paperwork on the first day of camp.

- **Bring appropriate footwear and knee pads. Wear school appropriate T-shirt.**

## PARENT PERMIT FOR ATHLETIC PARTICIPATION

I hereby grant permission for my daughter,

\_\_\_\_\_  
(First & Last Name)

To participate in the Summer Camp OR Any summer activities.

One of the following statements must be answered in the **affirmative** to complete this permit:

\_\_\_ **Yes**, I have adequate insurance to cover medical expenses, if needed.

\_\_\_ **Yes**, I will assume all responsibilities for medical expenses without the benefit of insurance.

WE HEREBY GIVE CONSENT TO THE COACHES OF COVINGTON SCHOOLS TO SECURE TREATMENT AT THE BEST AVAILABLE HOSPITAL IN CASE OF INJURY.

WE FURTHER GIVE CONSENT FOR THE HOSPITAL OFFICIALS OR DOCTORS TO TAKE NECESSARY ACTION TO PROVIDE THE BEST TREATMENT UNTIL WE ARE IN CONTACT WITH THE PARENTS.

- RETURN WITH CAMP FORM