

June 20-24, 2022 at AHS Gym

Come join the fun and learn fundamental volleyball skills from the Coaching Staff and Players of Ashford High School's Lady Jacket Volleyball Team. Get Small Group Instruction on Fundamental Skills of the game while participating with girls in your age group!

This week-long clinic will be run by your child's 2022-2023 grade level!

Schedule for 1st-3rd Graders (2022 School Year):

Mon-Wed June 20-22

9:00-11:00am -Individual Skills/Camp Fun

Thur-Fri June 23-24

5:00-6:00- Scrimmage (Parent Nights)

Camp Awards on Friday

Schedule for 4th-6th Graders (2022 School Year):

Mon-Wed June 20-22

1:00-3:00pm -Individual Skills/Camp Fun

Thur-Fri June 23-24

6:00-7:00- Scrimmage (Parent Nights)

Camp Awards on Friday

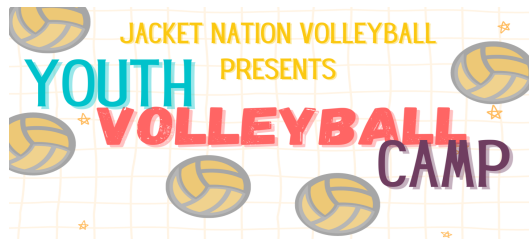
This camp is open to all girls ages 1st-6th Grade. Because we want your child to get the most individualized instruction, we are limiting each age group to 18 campers. \$100.00 per camper for the camp includes 8 hours of instruction/fun, a camp shirt/jersey, and awards for all campers. For Families with more than one child registering, \$15 for 1st Child, and \$90 for each additional child. Please sign up by June 1, 2022. Detach and return the bottom of this slip along with the waiver to Danielle Helms at AHS:

Danielle Helms—Ashford High School—helms.danielle@hcoe.us

Child's Name: _____ Grade in 22-23: _____

Parent's Name: _____ Phone #: _____

Office Use: Date Rec'd: _____ By: _____ Paid Date: _____ Cash Check Group Placement _____



Waiver of Liability, Assumption of Risks, and Indemnification Agreement In consideration of Ashford High School allowing the use of a portion of its property or facilities for the purpose of attending Youth Volleyball Camps at Ashford High School in June 2022, I _____ (camper's name) hereby agree to waive and release any and all claims which I or my family may now or hereafter have against Ashford High School, its representatives, agents, employees or assigns for any injury, illness, or damage which I suffer, unless proven such claim occurred based solely upon the gross negligence of Ashford High School, while on property or attending a camp or activity at AHS. This includes all activities related to the camp or activity including any transportation related to the activity. I and my family agree to fully and completely indemnify and hold harmless AHS, its representatives, agents or assigns from any claim, action, cause of action, or suit including litigation expenses and attorney fees due to any injury or damage which may have occurred on of or arising out of or in connection with my use of said premises. I, for myself and/or my minor child (if applicable and signatures appear below), acknowledge and understand this means I knowingly and voluntarily assume any and all risks, both known and unknown, appurtenant to the use of said premises for the camp or activity, wherever on AHS's campus they may occur, and at all times I am present on said premises. If this waiver/Agreement is signed by a parent or guardian below, you hereby acknowledge that this waiver and indemnity shall be binding upon you, any other parents or legal guardians of said minor child, and the minor child to the fullest extent permitted under the law.

Signature of Guardian or Parent if guest is under 18

Date Signed

Name of Guardian or Parent

Name of Camper

AHS Waiver of Liability

Name of Camper(s): _____ I, intending to be legally bound hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Houston County Schools, AHS, their representatives, agents or assigns for an and all damages and injuries which may be sustained by me or my child in association with this camp/clinic. Also, I hereby authorize the director of AHS Volleyball to act for me according to his best judgment in any emergency requiring medical attention. My child has had a recent physical examination and is physically able to participate in athletic activities, including volleyball. I further understand that AHS retains the right to use photographs of campers taken at camp for future AHS Volleyball Camp Promotion.

Parent or Guardian Signature

Date

Emergency Contact: _____ Phone: _____ Health Insurance Carrier: _____

Policy Number: _____ List any known allergies: _____