



**CLEAR BROOK  
LADY WOLVERINE VOLLEYBALL CAMP**

SUMMER 2006

JULY 24-27

6<sup>th</sup>-8<sup>th</sup> graders: 9am-12pm

9<sup>th</sup> graders: 1-4pm

COST \$100 (includes training and camp T-shirt)

LOCATION: CLEAR BROOK GYMS

**REGISTRATION FORM- VOLLEYBALL CAMP JULY 24-27 2006**

**INSURANCE**

By signing the insurance section of this form, I am declaring that my child is in good health and has my permission to participate in this camp. I hereby release CLEAR BROOK HIGH SCHOOL AND EMPLOYEES of the camp from claims present and future, resulting from any injury my child may sustain while attending camp. Liability insurance carried by the camp cover the camper only while actually participating in the camp session.

**PLEASE PRINT CLEARLY**

Camper's Name: \_\_\_\_\_ Shirt size \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/EmergencyPhone: \_\_\_\_\_

Grade and school entering fall 2006: \_\_\_\_\_

Parental signature below states I have read and understand the insurance policy for this camp as stated in the flier.

Signature: \_\_\_\_\_

**For further information contact Meredith Phillips at [mphillip@ccisd.net](mailto:mphillip@ccisd.net)**

**(Preferred) Early registration by mail: C/O Coach Meredith Phillips**

**Or register at the gym**

**PO Box 1831**

**Dickinson, TX 77539**

**MAKE MONEY ORDERS AND CHECKS PAYABLE TO Meredith Phillips**