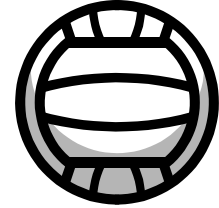
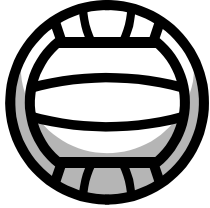


Bulldog Volleyball

Camp



WHERE: Bandera High School

WHO: 7th & 8th grade girls (09-10)

WHEN: July 27th — July 29th 8am—12pm

FEE: \$30 (*includes t-shirt and snacks*)

REGISTRATION: Please complete the registration form below, staple cash or check to form and return by **JUNE 1st**.

Mail to: Bandera Volleyball Camp

PO BOX 727 Bandera Tx 78003

Or DROP off at Bandera HS or Bandera MS

**** Please make checks payable to — BHS Athletics - Registration forms and money need to be received by Monday June 1st.**

Player's Name (print) _____

Grade _____ **(FALL 2009)**

T-shirt Size (circle one): YS YM YL AS AM AL XL

Parent/Guardian Name _____

Address _____ **City/Zip** _____

Home Phone _____ **Cell** _____

Assumption of Risk/Release of Liability

It is understood that Bandera ISD does not provide medical insurance covering injuries of any nature incurred in the Bandera volleyball camp. The undersigned hereby releases Bandera ISD, its successors, officers, agents, and employees from any and all claims, demands, and causes of action whatsoever in any way growing out of, or resulting from, participation in the volleyball camp. All participants should be covered by their own insurance policies.

I certify that _____ has my permission to participate in the Bandera H.S. volleyball camp.

Parent/guardian signature: _____

Date: _____

Consent for Treatment of a Minor

I, the undersigned, as parent or legal guardian of a minor child, hereby authorize the staff of the Bandera volleyball camp to act for me, according to their best judgment, in the case of any emergency requiring medical attention for my child.