

**CONSENT FORM:** Please sign the consent form below.

Application/Registration Form (Conditions of Registration)

1. Participants and Parents must read and sign below.
2. Appropriate fee must accompany each application.  
\$15.00 fee for returned check.
3. Once registered, the fee is non-refundable.
4. Signature of Participant, Parent or Guardian on this application indicates the understanding there is an assumption of risk involved in participating in a volleyball camp.
5. By signing this application, permission and authorization are hereby granted in case of emergency for physicians of the hospital closest to the Camp to treat any illness or injury for the Participant's best welfare.
6. **DISCLAIMER:** Signature of Participant, Parent or Guardian on this application waives and releases the Staff of the College Camp, Southeastern Community College, its Employees, all Corporate and Club Sponsors, and other Campers from any and all liability from any illness or injury occurring at the camp or going to and from the camp.
7. **PARENT'S RELEASE AND INDEMNITY AGREEMENT**

We (or I) hereby request that you accept this application for enrollment of my son or daughter in the All-Skills Volleyball Camp. In consideration of your acceptance of this application, we (or I) here by release SCC and all of its employees for all claims on account of injuries which may be sustained by our (my) son or daughter while attending the camp, and we (or I) agree to indemnify SCC and its employees for any claim which may hereinafter be presented by our (my) son or daughter of such injuries. We (or I) understand any camper who does not abide by camp rules may be dismissed from camp with no refund.

In the event of illness or injury we (or I) hereby give our (or my) consent for medical treatment and permission to the attending physicians to hospitalize, secure proper treatment, and order injections, anesthesia, or surgery. We (or I) will be responsible for any medical and other charges in connection to my son's or daughter's attendance at the Camp. If there are any restrictions on his or her participation, please explain on a separate sheet and attach to this application.

We (or I) certify that our (or my) son or daughter is covered by medical insurance.

\_\_\_\_\_  
Medical Insurance Company

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Work Phone



# SCC All Skills Performance Volleyball Camp

## June 26 - 29

Boys and Girls, grade 3 - 12

SCC West Burlington Campus



# Blackhawks

VOLLEYBALL



Dear Parents and Campers,

SCC All-Skills Performance Volleyball camp will provide a fun, educational, and challenging experience. We have one goal in mind - Improving the quality of volleyball players! This camp is designed to give the athlete the foundation of the essential volleyball skills, which are necessary for younger players to develop into the best players they are capable of becoming.

Our more advanced campers will learn offensive and defensive strategies that will capitalize on their team's strengths as well as their opponent's weaknesses.

Campers will be given the opportunity for individual instruction from the staff as they work to improve skills.

We believe we offer a quality camp, and hope you will join us for a fun and educational week of volleyball.

**James Rogers**

SCC Head Volleyball Coach

*Check us out!*  
[sccblackhawks.com](http://sccblackhawks.com)



# SCC All Skills Performance **Volleyball Camp** **June 26 - 29**

**BOYS AND GIRLS, GRADE 3 - 12**  
**LIMITED SPOTS AVAILABLE**

Session	Cost	Grade	Time
Beginner	\$30	3-5	8:30 am - 10:00 am
Intermediate	\$35	6-8	10:00 - 12:00 pm
Advance	\$40	9-12	1:00 - 3:30 pm

The Camp will be held at Southeastern Community College In Loren Walker Arena

Each camper will receive a camp T-shirt.

**2016-2017 Home Schedule**

Date	Time	Opponent
<b>August</b>		
31	6:30 PM	Carl Sandburg
<b>September</b>		
5	7:00pm	Indian Hills
13	7:00pm	NIACC
19	7:00pm	Monmouth JV
27	7:00pm	Southwestern
<b>October</b>		
8	11 am, 1 & 3pm	Tri - Lake Land & RMU Springfield
9	7:00pm	Iowa Wesleyan JV
11	7:00pm	DMACC
14	TBA	Tri - Morton College & Day-spring Bible
17	7:00pm	St. Ambrose JV
18	7:00pm	Iowa Lakes
23	7:00pm	Marshalltown C.C. <i>sophomore night</i>
<b>ICCAC Matches</b>		

## Camp Application

Duplicate form as needed per participant.

Camper's Name \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

School \_\_\_\_\_

Age \_\_\_\_\_ Grade going into \_\_\_\_\_

**Beginner \$30 (grade 3-5)**

**Intermediate \$35 (grades 6-8)**

**Advance \$40 (grades 9-12)**

T-Shirt Size  S  M  L  XL

Parent/Guardian \_\_\_\_\_

Parent's Phone \_\_\_\_\_

Parent's Email \_\_\_\_\_

## Payment

Make checks payable to: **SCC Volleyball**

Amount enclosed: \$ \_\_\_\_\_ (no refunds)

**MAIL COMPLETED FORM AND PAYMENT TO:**

James Rogers-SCC Volleyball  
 1500 West Agency Rd.  
 West Burlington, IA 52655

**For Office Use Only**



Date Rec'd	Check No.	Deposit	Balance