



2011 FUTURE FRESHMEN CLINICS

Girls take this opportunity to help you prepare for High School Tryouts.

Each 2 day clinic will be from 6:00 – 8:00 pm
 Except Session #4 will be from ~~10:00 am - 12:00 pm~~ 12:00-2:00 PM
 The clinic will focus on the basics Passing, Hitting and Serving.
 Learning proper technique will give you an additional edge
 When trying out for your High School Team.

Please note Time change for session #4 to 12:00-2:00 pm

CHECK BOX TO REGISTER FOR SESSIONS	SESSION #1 MAY 6 & 13 Fri & Fri	SESSION #2 MAY 20 & 21 Fri & Sat	SESSION #3 MAY & JUNE 27 & 3 Fri & Fri	SESSION #4 JUNE 14 & 15 Tue & Wed	SESSION #5 JUNE 17 & 18 Fri & Sat	\$ per session
FUTURE FRESHMEN CLINIC						\$50
Total \$ Amount						\$

NAME _____ EMAIL _____

PARENT'S NAME _____ CELL PHONE _____ HOME PHONE _____

STREET ADDRESS _____ CITY _____ ZIPCODE _____

HIGH SCHOOL ATTENDING IN SEPTEMBER _____

WAIVER & PROGRAM PARTICIPATION

The undersigned hereby agrees to defend, indemnify, and hold harmless California Heat Volleyball Club and its coaches and director against any and all losses, liability charges, and expenses(including attorney fees), and costs which may arise by reason of participation in this program. (California Heat Volleyball Club does not provide accident, medical, liability, workers' compensation insurance, or any insurance for program participants.) As a parent/guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury. I agree to pay any and all costs incurred as a result of said treatment. I agree to carefully inspect and satisfy for myself that the facilities provided are reasonably safe for their intended use. Once having conducted the inspection, I agree to expressly assume the risk of participation at the premises. I understand the California Heat Volleyball Club retains the right to use photos taken during activities for publicity purpose.

Signature (Parent/Guardian) _____ Date: _____
 SIGNATURE REQUIRED TO PROCESS REGISTRATION

CHECKS PAYABLE TO:
 MAIL CHECK & REGISTRATION FORM TO:
 Sessions have limited enrollment, so register early

California Heat Volleyball Club
 300 S. Lewis Road, Unit D
 Camarillo, CA 93012

For more information
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 calheatvbc@gmail.com
 805 657-6700