

Central Charger Volleyball Camp

Sessions 1, 2, and 3—July 26th-29th at Charger Gym

Session 1 Incoming 2nd – 6th Graders 9am – 11am	Session 2 Incoming 7th – 8th Graders 11:30am – 2pm	Session 3 Incoming 9th Graders 9am – 12pm
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Camp sessions will be held at Central High School—9450 Ray White Rd. Keller, Texas 76244

- Individual skill work and team concepts taught at an age-appropriate level.
 - Instructor to athlete ratio is 1:10 in most situations.
 - Price includes instruction and a Camp T-Shirt
 - Athletic shoes are required. Knee pads are optional but recommended. We will provide volleyballs.
 - Players are encouraged to bring money to deposit in their account in the Concession Stand Bank for snacks each day.
- Due to COVID-19 number/percentage restrictions, parents might not be able to watch from inside.

Directing the Central Charger Volleyball Camps will be Head Coach Lyndsay Baker. Coach Baker is in her 18th year of coaching at Central High School and will be starting her 4th year as the Head Coach of the Chargers. Assisting with camps will be volleyball coaches from Central High School, Hillwood Middle School, Parkwood Hill, and former Charger Volleyball players.

Cost and Payment Deadline:

Mail-in Registration \$110 postmarked by July 20th

Central Volleyball Camp * c/o Lyndsay Baker * PO Box 701 * Hurst, Texas * 76053

****\$120 after July 20th****

Make checks payable to: Charger Volleyball OR pay on day 1 with PayPal and Venmo

Please contact Coach Baker at Lyndsay.Baker@kellerisd.net or (817) 683-3213

Please complete and return this form with your \$110 camp fee, check or money order payable to Charger Volleyball, postmarked no later than July 20th. After the July 20th deadline, the cost of camp is \$120. Your check is your receipt. (If paying by PayPal or Venmo on day 1, please note your payment method at the bottom before sending in your form)

Mail to: Charger Volleyball Camp * c/o Lyndsay Baker * PO Box 701 * Hurst, TX 76053

Check One Session: I (grades 2-6) ___ II (grades 7 & 8) ___ III (grade 9) ___

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

Child's Name: _____ Parent Name: _____

Address: _____ City: _____

Zip Code: _____ E-mail Address: _____

Cell Phone: _____ Grade (fall 2020): _____ School 2020-2021: _____

IN CASE OF EMERGENCY, PLEASE CONTACT: Name: _____

Relation: _____ Phone #: _____

LIABILITY WAIVER:

I, the undersigned parent/legal guardian, give permission for _____ to participate in the Central Charger Volleyball Camp at Central High School. I understand that Keller ISD, its employees, or anyone acting on their behalf, will not be held liable or responsible for personal injuries and property damage or loss of any kind, which may occur, during the camp. The above forgoing release has been read and understood by the undersigned.

I also give permission for any emergency medical care or treatment by a physician, surgeon, hospital or medical care facility that may be required.

Parent/Legal Guardian

Date

___ Check Included

___ Venmo

___ PayPal