



North East ISD Athletic Department
VIRGIL T. BLOSSOM ATHLETIC CENTER

Executive Director Karen Fink	Director/Athletics Terry Paal	Director/Athletics Timothy Woods	Director/Athletics Jesse Moore	Director/Athletics Kelly Parker
Aquatics Coordinator David Johnson	Director PE/Health/Athletics Rachel Meyer	Tennis Coordinator Patrick Johnson		

CHURCHILL MIDDLE SCHOOL VOLLEYBALL CAMPS 2018

WAIVER OF LIABILITY FORM SUMMER CAMP/RECREATION PROGRAM

In consideration of my child's voluntary participation in the North East Independent School District Athletic Department's Summer Camp Program, which includes use of its facilities and/or equipment, and in addition to the payment of any fee associated with this participation, I do hereby agree to waive, release and forever discharge the North East Independent School District, its trustees, employees, agents, and representatives from any and all responsibility or liability, under state and/or federal law, for any injuries and/or other damages resulting from my child's participation in the Summer Camp Program. This participation includes any organized or individual activity that is part of the Summer Camp Program, including but not limited to preparation sessions, workouts, and meetings. I hereby acknowledge and understand that this waiver of liability extends to claims by me, my child, and/or any other parent or legal guardian of my child.

My signature below certifies that I understand and accept the conditions and waiver as explained above.

PARENT OR GUARDIAN'S SIGNATURE

DATE

PARENT OR GUARDIAN'S PRINTED NAME

STUDENT ATHLETE'S NAME

SCHOOL

Revised 2/23/2016



JUNE 12-15th

8:30-11:30 a.m.

7TH - Eisenhower M.S.

8TH - Churchill H.S.

CHURCHILL VOLLEYBALL 2018 CAMP APPLICATION

ABOUT THE CAMP

**The purpose of these camps is to develop skills.
Our goal is to teach and reinforce volleyball
fundamentals.**

**Camp Director: Jo Anne Hultgren,
Head Volleyball Coach, Churchill High School**

**Camp staff will be high school and middle school
coaches, as well as
former Churchill standouts.**

**Camp fee is \$60.00 and is NON-REFUNDABLE.
Make checks payable to
Churchill Volleyball.**

**Return all information and payment to your middle
school coach or send to:**

**Churchill High School
Attn: Jo Anne Hultgren
12049 Blanco Road
San Antonio, TX 78216**

CIRCLE DESIRED CAMP: 7TH 8TH

CAMPER: _____

PARENTS
(GUARDIAN): _____

PARENT E-MAIL: _____

PARENT CELL PHONE: _____

ADDRESS: _____

ZIP CODE: _____

SCHOOL YOU WILL ATTEND IN THE FALL:

T-SHIRT SIZE (Adult Sizes Only): S M L XL

SCHOOL TEAM PLAYED ON THIS YEAR (if applicable):

PREVIOUS CLUB EXPERIENCE (List teams and years played):

PREVIOUS CAMP EXPERIENCE (List camps and years attended):

Student Signature: _____

Parent/Guardian Signature: _____

Date: _____

**** Be sure to sign the NEISD waiver on the reverse side.**