



Yuba College Volleyball Camp Registration Form

Location: Camps will be held at Yuba College, 2088 N. Beale Road, Marysville, CA 95901



Contact Head Volleyball Coach Julia Coats at (530) 301-6934 or jcoats@yccd.edu

Player's Name: _____

Mailing Address: _____ City _____ ZIP _____

Player's Cell Phone: _____ Parent's Cell Phone: _____

Player or Parent's Email: _____

Emergency Contact: _____ Emergency Contact Phone: _____

Date of Birth: _____ Age: _____ Grade: _____ School: _____

Please make all checks/money orders payable to: North Valley Jrs VBC (NVJVBC)

There are 2 ways to register for the camps

1. Register and Pay Online **and** Bring your completed Registration Form to camp. (Forms will be available on site.)
2. Bring your completed form and payment to the camp on the day of camp. (Forms will be available on site.)

For Online Registration, please follow these steps:

1. Click on or plug in this link: <http://www.northvalleyjrsvbc.com/payments.htm>
2. Pay online through Paypal with a debit/credit card
3. Bring Check or Money Order Payable to North Valley Jrs VBC (NVJVBC)
4. Pay with cash- Day of at the registration desk

Dates and Time	Check Box if Attending	
Monday, July 22nd - Friday, July 26th 8:00am to 1:00pm	Camp #1- \$120.00	<input type="checkbox"/>
Monday, July 29th - Friday, August 2nd 8:00am to 4:00pm	Camp #2- \$175.00	<input type="checkbox"/>
Check Number:	Total Cost: \$	

Paid Online

Camp T-Shirt Size- please pick a size

YM	YL	AS	AM	AL	AXL	A2XL
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Awareness of Risk:

As a parent or guardian of the above named participant, I hereby state that I am voluntarily applying for my child to participate in volleyball related activities with Yuba College. I am aware that recreation and sporting activities may be dangerous or hazardous activities. My child is voluntarily participating in this activity with the knowledge of the danger involved. I hereby agree to accept any and all risk of injury, death or damage to personal property. I hereby state that my child is in good health and has my permission to participate in Yuba College related activities. In consideration for entering into a contract with Yuba College and its owners, I hereby agree that I voluntarily release, discharge, waive and relinquish any and all actions or causes of action for personal injury, property damage, or wrongful death occurring to my child arising as a result of engaging in the recreational activities performed in these camps. I agree that under no circumstances will I or my child's assignees, heirs, guardians, and legal representatives prosecute, present any claims for personal injury, property damage, or wrongful death against Yuba College, its owners, or any of its officers, agents, servants, coaches, spectators, participants, or employees for such persons or otherwise. *I am aware that this is a release of liability and agreement to indemnify Yuba County, Yuba College, and any staff, officers, officials, employees, and volunteers connected with the above activities.*

Print Name of Player

Print Name of Parent/Guardian

Signature of Player

Date

Signature of Parent/Guardian

Date