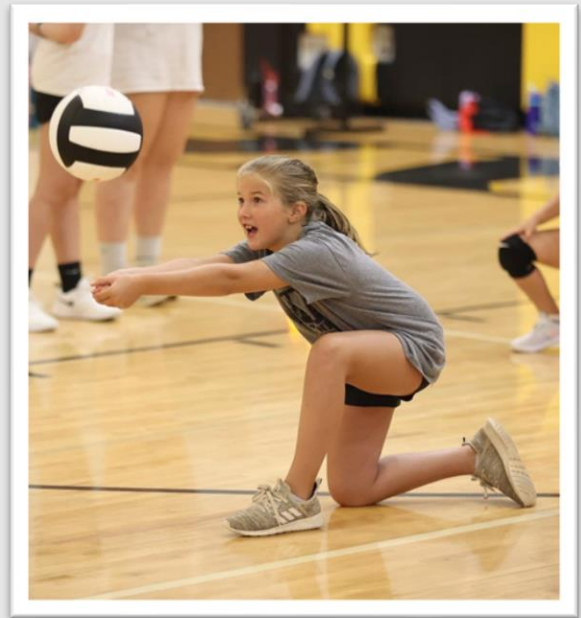


Chesnee Volleyball Camp

July 18-21 9am - 12pm
For Boys and Girls
Rising 3rd - 8th



\$50 before 7/11
\$60 for after 7/11

Please return this part to Katie Jolley. You can email to Katherine.jolley@spartan2.org or mail it to Chesnee High School c/o Katie Jolley, 795 S. Alabama Ave., Chesnee, SC 29323
Make checks payable to Chesnee High School

Student's Name: _____ Parent's Name: _____

Parent's email: _____ Parent's Phone: _____

Student's grade level next year: _____ Tshirt size (include Y or A): _____

I hereby state that the Chesnee Volleyball staff is not responsible for any preexisting injury or reoccurrence of any undisclosed preexisting injury or illness of the camper named above prior to the first day the camper registers. I also understand that injury may happen as a result of normal participation in the camp and I will not hold Chesnee High School responsible for these injuries.

I hereby authorize Chesnee High School to act for me according to their best judgement in any emergency requiring medical attention and I hereby waive and release a camp from any and all liability for injuries occurred while at camp or arising out of my traveling to or from the Chesnee Volleyball Camp.

Signature of Parent or Guardian: _____