

Mars Volleyball Camp 2019

Parent Permission Slip

Please fill out this registration form and return with payment by Friday, June 14, to Mars Volleyball Camp, PO Box 75, Mars, PA 16046.

Checks should be made out to: Mars Volleyball Boosters.

Camper's Name: _____

T-shirt size (adult sizes): S M L XL

Grade entering: _____ School: _____

Address: _____

Phone Number: _____ Email: _____

Emergency Contact Name/Number:

Insurance Carrier/ID Number:

Please Read and Sign: I agree to allow my child to participate in the Mars Volleyball Camp and certify that she is physically able to participate in volleyball related activities. I understand that the Mars Area School District is not responsible for any injury that may occur and I release the camp staff to act according to their best judgment in case of emergency. In case of any medical conditions that the camp staff needs to be made aware of, I will provide the information in writing.

Signature: _____

_____ Date: _____

This correspondence is being circulated as a community service at the request of a non-school organization. This information and/or activity is not associated with Mars Area School District. Any questions or correspondence should be directed to the activity coordinator using the contact information provided.

Mars Volleyball Boosters

Summer Camp 2019



Volleyball, Friends and Fun!

June 17-20, 2019

9:00 AM - 12:00 PM

Mars Area HS Main Gym

Fee: \$125

Open to girls entering 4th-9th grade



Participants will receive a camp t-shirt, volleyball, instruction, drills, and competition led by experienced coaches and current players.

Questions? Contact Coach Caraway at
marsareahsvolleyball@gmail.com or at 724-759-0995