

ONCE  
A RANGER,  
ALWAYS A  
RANGER!

# 2019 RANGER VOLLEYBALL CAMP

Our Ranger Volleyball Camp will give your daughter a chance to work with your High School and Middle School Coaching Staff. It will also give your daughter a chance to work with high school players and watch them demonstrate specific skills. The camp will feature fundamentals, competitions, and drills used at all levels in our volleyball program.

### Camp Directors

- o High School Volleyball Staff
- o Middle School Volleyball Staff
- o High School Volleyball Players

### DATE:

**Monday, July 22 – Thursday, July 25**

### GRADES: K–8th

Grade level is based on the 2019/2020 school year.

### TIMES:

**1:00–3:00 (6th–8th)**

**3:15–5:00 (K–5th)**

### LOCATION:

**Hamilton Township  
High School**

### COST: \$40

**\*T-Shirt Included—Register & mail in before  
July 12th for guaranteed shirt size.**



HAMILTON TOWNSHIP RANGERS



### CAMP APPLICATION & RELEASE

Student Name \_\_\_\_\_ Grade (2019/2020 School Year) \_\_\_\_\_

Phone Number \_\_\_\_\_ Parent Email Address \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

### T-Shirt Size (Circle One)

Youth Sizes: Youth Medium Youth Large

Adult Sizes: Small Medium Large X-Large

Emergency Contact & Phone Number \_\_\_\_\_

**PERMISSION/MEDICAL RELEASE:** The above student has my permission to attend the Ranger Volleyball Camp. I hereby agree that the participant above has been examined and found to be in good physical health. I have no knowledge of any physical impairment that would affect or be affected by this child participating in the camp. In addition, I agree that the participant is physically fit and able to take part in vigorous activity and should any illness or injury occur, I give consent to allow medical treatment for the participant. I am aware that injuries may occur during the camp and I waive, release, and forever discharge Hamilton Local Schools, the Board of Education, the employees, and the camp authorities from any and all injuries. In addition, I understand that the camp authorities are not responsible for any accidents, medical or dental, incurred during the course of instruction given by staff, and said staff is to be held blameless. I also understand that cooperation and behavior are important and should the participant behave in any way deemed inappropriate, the camp coordinator may expel her from the camp and the fee will not be refunded. Once a fee is paid, there will be no refunds.

### Mail Payment and Registration to:

*Hamilton Township High School  
Carole Morbitzer—Volleyball  
775 Rathmell Road  
Columbus, OH 43207*

SIGNATURE \_\_\_\_\_ (Parent or Guardian)

**Checks Payable to:**  
*Hamilton Township High School*

**Payment Due**  
*\$40 on or before Friday, July 12th  
for guaranteed shirt size*