

The following must be signed for each individual before participation:

I, as a parent or guardian of _____, hereby grant permission for her to participate in volleyball activities with Coaches Keith Giboney and Cade Smith and their staff and acknowledge that she is physically able to participate in volleyball activities. We hereby release Coach Keith Giboney/Cade Smith and other participating staff who participates in UAH camps, the University of Alabama in Huntsville, its Board of Trustees, Administration and employees, from all claims of injury or illness which may be sustained by the above named individual and authorize the directors of the camps to seek medical treatment for her in a situation in which the camp staff perceive as an emergency.

Signature of Parent/Guardian:

_____ Date _____

Make Checks payable to: UAH Volleyball Camps

Mail to:
UAH Volleyball
205 Spragins Hall
Huntsville, AL 35899
cade.smith@uah.edu, 256-824-2274
www.uahchargers.com



@UAHVolleyball



**What: Winter Position
Clinics**

**When: Jan 10th, Jan 24th,
Jan 31st, March 7th, 2015**

**Where: The University of
Alabama in Huntsville
(Spragins Hall)**



Position Clinic: Grades 7-12



Saturday January 10th, 24th, 31st, March 7th

- Session 1: 9:00 am-10:30 am: Setting
- Session 2: 10:30am –Noon: Defense
- Session 3: 1 pm – 2:30 pm: Hitting

**Cost: \$20 for 1 session, \$35 for 2 sessions,
\$50 for all 3 sessions in a day.**

*Note: Campers attending before and after lunch may bring a sack lunch, be picked up to go to lunch by a parent, or money can be left with the coaches who will bring lunch to the gym.

**Walk up registrations will be taken only if room is available.



Camper Info:

Name_____ Grade Entering _____

Address:_____

Parent Email:_____

Emergency Contact name: Emergency Contact phone:

Clinic Attending:

(If your daughter is attending more than one clinic, please register separately for each day.)

_____ January 10th

_____ January 24th

_____ January 31st

_____ March 7th

Session(s) Attending:

_____ Session 1-Setting

_____ Session 2-Defense

_____ Session 3-Hitting

Cost: \$20 for 1 skill session, \$35 for 2 skill sessions, \$50 for all 3 skill sessions in a day.

Total Cost \$ _____

Mail in this form or register online at:

www.uahvolleyballcamps.com