

**LASSEN COMMUNITY COLLEGE
2019 SUMMER VOLLEYBALL CAMP
REGISTRATION FORM**

JUNE 17 – 20, 2019

AGES 12-18

3-7 PM

\$75 / PLAYER

T-SHIRT INCLUDED

DEADLINE TO SIGN UP IS JUNE 14, 2019

NAME: _____ DOB: _____

GRADE: _____ GRAD YEAR: _____ SHIRT SIZE: _____

ADDRESS: _____

HOME PHONE: _____ EMERGENCY PHONE: _____

PARENT NAME(S): _____

FATHER'S CELL: _____ MOTHER'S CELL: _____

Parent / Guardian Release and Agreement: I hereby give my consent for _____ to participate in LCC Volleyball Camp. I authorize my child to go with and be supervised by a representative of LCC. In case my child becomes ill or is injured, you are authorized to have my child treated and I authorize the medical agency to render treatment.

NAME: _____

SIGNATURE: _____ DATE: _____

As stated in the CA Education Code Sec. 35330, I understand that I hold LCC, its officers, agents, and employees harmless from any and all liability claims, which may arise out of or in connection with my child's participation in this activity. I fully understand that participants are to abide by all rules and regulations governing conduct during this activity. Participants must have health or accident insurance:

Insurance: _____ Group No.: _____

Claim No.: _____ Physician: _____

Phone: _____

List any known allergies or medical conditions: _____

PLEASE MAKE ALL CHECKS PAYABLE TO:

LASSEN COLLEGE VOLLEYBALL
P.O. BOX 3000
SUSANVILLE, CA 96130

Contact Julie Brown for more information:

Jubrown@lassencollege.edu

(530) 310-4131

Forms can also be dropped off at NST Engineering, 1495 Riverside Dr., Susanville, CA