



Clarion
University

HOME OF THE GOLDEN EAGLES



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Clarion Satellite Camp
At
Elite Sports
July 6th..7th 8th

Serving..Defense..Hitting
Sessions

Junior High and High School

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SESSION 1	Beginner Serving	July 6th	9:00-11:30	<input type="radio"/>
SESSION 2	Better Your Serve	July 6th	9:00-11:30	<input type="radio"/>
SESSION 3	Aggressive Serving	July 6th	9:00-11:30	<input type="radio"/>
SESSION 4	Jr High Defense	July 6th	12:30-3:00	<input type="radio"/>
SESSION 5	Advanced Defense	July 6th	12:30-3:00	<input type="radio"/>
SESSION 6	Transitioning Defense	July 6th	12:30-3:00	<input type="radio"/>
SESSION 7	High School Serving	July 7th	9:00-11:30	<input type="radio"/>
SESSION 8	Transitioning Defense	July 7th	9:00-11:30	<input type="radio"/>
SESSION 9	Advanced Defense	July 7th	9:00-11:30	<input type="radio"/>
SESSION 10	Jr High Hitting	July 7th	12:30-3:00	<input type="radio"/>
SESSION 11	Advanced Attacking	July 7th	12:30-3:00	<input type="radio"/>
SESSION 12	Transitioning Attacking	July 7th	12:30-3:00	<input type="radio"/>
SESSION 13	Jr High Ball Control	July 8th	9:00-11:30	<input type="radio"/>
SESSION 14	Jr High Ball Control	July 8th	9:00-11:30	<input type="radio"/>
SESSION 15	Beginner's Ball Control	July 8th	9:00-11:30	<input type="radio"/>
SESSION 16	Better Your Serve	July 8th	12:30-3:00	<input type="radio"/>
SESSION 17	Controlling your serve	July 8th	12:30-3:00	<input type="radio"/>
SESSION 18	Advanced Serving Techniques	July 8th	12:30-3:00	<input type="radio"/>

**Per session fee \$45.00
Includes Clarion Volleyball
T-shirt.**

**Choose 2 sessions for \$80.00
(Savings of \$20.00)**

**Choose 3 sessions \$105.00
(Savings of \$30.00)**

**Choose 4 sessions \$140.00
(savings of 40.00)**

**Choose 5 Sessions \$175.00
(savings of \$50.00)**

**Choose 6 Sessions \$180.00
(Savings of Savings)**

**Each Session Limited to
14 Girls**



**EACH SESSION IS LIMITED TO first 14 GIRLS. Date of payment is considered application date.
Must have waiver on file.**

Name _____

Address _____

Zip _____ **Phone** _____

Email: _____

Grade _____ **Birthdate** _____

School _____

T-Shirt Size _____ (indicate youth or adult)

Amount Enclosed _____ **Cash** ____ **Check** ____ **Charge** ____

Charge Card # _____ **EXP** _ / _

Card Holder Signature _____

Please attach the sheet with sessions chosen

Waiver and Informed Consent Agreement

In consideration of my child's participation in the activities of Elite Sports Ltd, I do hereby declare him/her to be medically able to participate in the activities offered by Elite Sports Ltd.

I understand that there are risks that may include disabling injury and/or death involved in all physical activities. I agree to familiarize myself with all equipment, facilities, rules and physical demands related to the activities undertaken.

I agree to hold free from any and all liability Elite Sports Ltd and their respective officers, employees, members, volunteers, and sponsors and do hereby for myself, my heirs, executors and administrators waive, and release and forever discharge any and all rights and claims for damages which I may have or which may accrue to him/her arising out of or connected with his/her participation in any of the activities of Elite Sports Ltd.

I have been appraised of and acknowledge the particular hazards and potential dangers in my child's participation in these activities.

Parent or Legal custodian's Signature:

_____ Date: ____/____/____

please inform us of all food allergies: _____
Or

Medical Conditions that we should be aware of _____