

# WALDORF VOLLEYBALL SERVING CAMP



**Location: Hanson Fieldhouse // Forest City, Iowa**

**Date: Feb. 10, 2019**

**Cost: \$20**

**Times:**

**Middle School Camp (Grades 6-8): 12-1:30 p.m.**

**High School Camp (Grades 9-12): 2-3:30 p.m.**

## Camp Highlights:

- // Training for athletes of all levels to become a better server
- // Focus on Technique, Strategy and Mindset
- // Limited spots available

All camps led by Bri Ebenhoe, Head Volleyball Coach and Matt Ebenhoe, Assistant Volleyball Coach at Waldorf University

## REGISTRATION INFORMATION

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ School: \_\_\_\_\_

Current Grade: \_\_\_\_\_  Middle School Camp  High School Camp

## MEDICAL INFORMATION

Name of Policy Holder: \_\_\_\_\_ Student's Date of Birth: \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent/Guardian name printed: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

If parents cannot be reached in case of emergency, notify (Name): \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_ Known Allergies: \_\_\_\_\_

Asthma:  Yes  No Diabetes:  Yes  No Skin Conditions:  Yes  No Other Medical Conditions: \_\_\_\_\_

Medications Currently Taking: \_\_\_\_\_

**Checks Payable to Waldorf Volleyball ~ Return camp registration and payment to Coach Bri Ebenhoe, at 106 S. Sixth Street, Forest City, Iowa 50436  
Questions Contact Coach Ebenhoe @ [bri.ebenhoe@waldorf.edu](mailto:bri.ebenhoe@waldorf.edu) ~ office 641.585.8230 ~ cell 608.792.4000**

*Participants will be supervised by the coaches and camp staff. It should be noted that all participants are required to carry their own medical insurance and to take full responsibility for all payment of any medical care. Waldorf University does not provide any additional medical insurance for the participants. By signing this form you release Waldorf University, its employees and board of directors from all claims on the account of any injuries which may be sustained by your child while attending the camp. You agree to indemnify and hold Waldorf University and its employees harmless for injury and expense, including costs of defense, which may result from activities associated with participation in volleyball camp. If medical attention is required for injury or illness for the above named applicant, you give permission for such medical care, and you take full responsibility for payment of such medical care.*