

## Volleuball Camp

Hold Harmless Agreement & Waiver

The undersigned parent or guardian understands that the participant will be engaging in physical activity including sprinting, jumping, handling volleyballs and other related activities during the camp that contains inherited risk of physical injury and the undersigned assumes the risk and releases Chevy White, Katie Denton (Two Chicks Volleyball Camp) and Grace Pointe Church from any and all liability for personal injury arising out of the applicants participation in volleyball camp.

I hereby grant permission for my child to attend Two Chicks Volleyball Clinic and to be treated by a licensed physician for any injury, accident, illness or other mishap.

She is physically fit according to our family physician, and I further agree to pay through my own insurance company or otherwise for any medical treatment that may be necessary.

I HAVE READ THE ABOVE AND FULLY UNDERSTAND ITS PROVISIONS

Athlete Name Printed	
 Parent signature	 Date
Paretti signature	Dule
Full Name:	
Birth date:	
Home Address:	
Home Phone:	
Applicants Cell:	
Email:	
Parents'/Guardians' Name(s):	
Parents' Home Phone:	
Parents' Cell:	
Emergency contact:	
Name:	Phone #: