



BUMP-SET-SPIKE IT—THAT’S THE WAY WE LIKE IT



PANTHER VOLLEYBALL

SUMMER CAMP 2019

- Who: Girls interested in volleyball & entering 6th, 7th or 8th grade in the fall of 2019
- When: **Monday, July 8th– Thursday, July 11th from 9am-11am**
- Where: Pioneer Trail Middle School Gym
- Cost: \$55. Registration is allowed at the door for \$60 (if space permits). No T-shirt will be available if registering after May 31.
- How: Complete the bottom portion of this form and return with registration fee to Pioneer Trail Middle School, ATTN: Michelle Toutges, 15100 W. 127th Street, Olathe, KS 66062. **Please make checks payable to Michelle Toutges.**
- Info: All ability levels are welcome and encouraged to participate in camp. Incoming players will learn basic fundamentals for individual improvement including passing, setting, serving and hitting. We will also have some fun competitions throughout the camp. Campers whose registration is received prior to May 31st will receive a camp T-shirt. Scholarships are available before May 31st for individuals who need help covering the registration costs. Please contact Coach Toutges for details.
- Questions: Email Coach Toutges at toutgespt@olatheschools.org or call 913-780-7272.

-----Cut along line and hand in with payment to PT Office -----

Label Envelope: Attn: Michelle Toutges/Volleyball

Player’s Name _____ T-shirt: S M L XL (adult sizes)

_____ 6th-7th-8th grade (\$55) _____ Late Fee if Registering After May 31 (\$5)

I hereby register my child to participate in the Panther Volleyball Camp. I understand that this camp is not sponsored by Pioneer Trail Middle School or the Olathe School District. I also hereby release the employees of the camp from liability for any and all injuries while participating in any activities connected with this camp. I also agree to assume financial responsibility for any and all injuries which might occur as a result of participation in this camp. I understand I will receive a refund for half the cost should I choose to withdraw from camp prior to June 26st. No refunds after June 26st.

Parent/Guardian Signature _____

Emergency Phone Number _____ Amount enclosed \$ _____