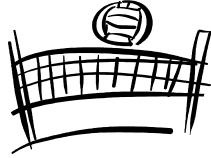


**14th Annual Candice Collins Gibson Volleyball Camp 2018
@ College Park High School**



July 23rd -26th @ College Park High School

*Incoming 4th-7th Grade in Auxiliary Gym

*Incoming 8th & 9th Grade in Competition Gym

ALL SESSIONS: 8:30am to 11:30am

Camp Fee: 100\$ (Includes Camp T-Shirt)

Camp Description:

The Camp will provide comprehensive instruction on the fundamentals of volleyball with an emphasis on execution. All skills will be taught at a level that will help you become a better volleyball player. The fundamental skills that will be covered are passing, setting, serving, hitting and blocking. There will be a "Camper of the Day" award at the end of each session. On Thursday there will be a round robin tournament and an All-Star Camp Team announced for each age group.

Head Coach/Camp Director: Candice Gibson

This will be Coach Gibson's 14th year at College Park. It is also her 18th year of coaching high school and assisting college volleyball. Coach Gibson played collegiate volleyball at Sam Houston State University for 4 years and was a graduate athlete assistant for the volleyball and strength & conditioning programs. College Park Volleyball has made 11 consecutive playoff appearances and were Regional Finalist in 2017! WIN THE DAY!

Check out www.collegeparkvolleyball.org for more information!!

College Park Volleyball Camp Application (Please cut and return the bottom portion)

Camper's Name: _____ Age: _____ Grade in Fall 2018: _____

Parent's Name & Number: _____

Email Address: _____

Emergency Medical Contact #: _____

Shirt Size: **Youth-** Large **Adult-** Small Medium Large XL

Please check which session attending: ****Make checks payable to Candice Collins Gibson****
_____ Incoming 4th thru 7th Send to: College Park High School
_____ Incoming 8th & 9th Grade Attn: Candice Collins Gibson
3701 College Park Drive, The Woodlands, 77384

Camp Waiver:

I hereby authorize the camp staff to act for me according to their best judgment in an emergency requiring medical attention. I hereby waive and release Conroe Independent School District and the CPHS Camp Staff from any and all liability for any injuries incurred while at Candice Collins Volleyball Camp. I have no knowledge of any medical problem or physical impairment that would affect the above named camper to safely participate in the camp program as outlined in the flyer. By signing this statement, I understand that CISD does not carry insurance covering injuries that my child may sustain and they cannot be held responsible for any accident or payments resulting from such an accident. In the event of an injury to my child, I recognize that CISD, the Board of Trustees, its agents and its employees are in no way liable for injuries, medical expense, or damage and will have no insurance covering our child. I certify that the camper is covered by a medical insurance policy in case of illness or injury.

Parent or Guardian Signature: _____ Date: _____

Physicians Name & Number: _____

Please any medical conditions that the camp staff should be aware of: