



FALL PROGRAMS REGISTRATION FORM

Player Information (please print legibly):

Athlete's Name _____ Age _____ Grade _____

School Name _____ Club Affiliation (if any) _____

Parent Information:

Parent (or Guardian) Name(s): _____

Address _____
(street address) (City) (State) (Zip)

Home: _____ Work: _____ Cell: _____ Pager: _____

e-mail (that gets checked regularly) _____

Where did you hear about Triangle's summer camps?

- I am Triangle member
- Web
- Friend/Triangle Member
- YVP
- Coach
- Other _____

Mail to: Triangle Volleyball Club
 9301-140 Globe Center Dr.
 Morrisville, NC 27560

Please check all camps that you wish to attend:

YVP SERIES

Grades 2-8, with little or no experience

YVP Course, \$135
(our popular 6-week instructional course)
 Sundays, 4-530 PM or Tuesdays, 5-630 PM

Fall Series #1

- Sept 12,19,26,Oct 3,10,17 (Sundays)
- Sept 14,21,28,Oct 5,12,19 (Tuesdays)
- 'Bonus Pack' - Upgrade either session above to include all (6) Fall Series #1 Games & Play sessions (dates below), \$235 TOTAL

Fall Series #2

- Nov 7,14,21,Dec 5,12,19 (Sundays), \$135
- Nov 2,9,16,30,Dec 7,14 (Tuesdays), \$135
- 'Bonus Pack' - Upgrade either session above to include all (6) Fall Series #2 Games & Play sessions (dates below), \$235 TOTAL

Fall YVP TEAM (Series #1 & #2), \$135
(must apply for course on line; no payment required with application, visit our website)

Fall Series #1—YVP Games & Play, \$20/session, Sundays 530-7 PM

- Sept 12 Oct 3
- Sept 19 Oct 10
- Sept 26 Oct 17

Fall Series #2—YVP Games & Play!, \$20/session, Sundays, 530-7 PM

- Nov 7 Dec 5
- Nov 14 Dec 12
- Nov 21 Dec 19

YVP Learn to Serve!, \$20/session
Weekdays, 5-630 PM

- Sept 16 Oct 27
- Sept 30 Nov 3
- Oct 14

Total YVP Series \$ _____

CLASSIC SERIES

Middle & high school athletes with experience

SKILL AND TOPIC-SPECIFIC CAMPS

Attacking, \$30 each
Sundays, 2-4 PM

- Sept 12 Oct 17
- Sept 26 Nov 14

DYGO-Defense (Dig Your Guts Out), \$30
Sundays, 7-9 PM

- Sept 12 Oct 17
- Sept 26 Nov 14

Jump Serve, \$25 each
Sundays, 7-830 PM

- Sept 19 Oct 24
- Oct 3

Serving & Passing, \$30 each
Sundays, 2-4 PM

- Sept 19 Oct 31
- Oct 3

Total Classic Series \$ _____

JUMP

Vertical Jump Training

Sundays, Sept 12 - Nov 21
 Participants must be least 13 with a solid base of core strength and fitness.

- 545-615 PM, Full Tuition \$100
- 615-645 PM, Full Tuition \$100

JUMP Total \$ _____

ELITE SERIES

High school athletes with club experience

XTREME CLINICS
 Xtreme Clinics are narrowly focused and assume mastery of fundamental skills

Xtreme Defense
Sundays, 7-9 PM

- Sept 19-High Lateral Balls, Fisty & Flipper
- Oct 3-Low Lateral Balls & Barrel Roll
- Oct 24-Balls in Front & Collapse Dig

Xtreme Outside Hitter
Sundays, 7-9 PM

- Sept 12-High Angle & The Art of the Roll Shot
- Sept 26-Four and One
- Oct 17-It's All About the LINE
- Nov 14-Rip it CROSS

Total Elite Series \$ _____

TSA

Triangle Setting Academy

TSA provides both developing and experienced setters with the regular technical training, instruction, and repetitions. With time, participants will develop into highly efficient, capable, and confident setters.

2010 Fall Academy
SUNDAYS, 530-7 PM
 September 12 - November 21 (11 sessions)
 Academy size is limited to 32 participants.

- Fall TSA, Full Tuition, \$175

Drop-ins welcome (\$20/session) space permitting.

TSA Total \$ _____



This program requires an application. Please visit our website to learn more about the program and to apply.

GRAND TOTAL (ALL CAMPS) \$ _____

DATE REC'D _____ Comments: _____

Check # _____ Cash Credit card

Please return registration form, payment, and medical release and liability waiver (reverse side) to secure your spot...thank you!



Medical and Liability Release Form

(form must be completed for non-Triangle members attending Triangle Summer Camps)

Player's Name _____ Phone _____
Parent's Name _____ Work/cell phones _____
Address _____ City _____ Zip _____
Family Physician _____ Phone _____
Family Dentist _____ Phone _____
Insurance Carrier _____ Policy # _____
Member/Card # _____ Group # _____

In case of emergency please contact:

Name1 _____ Phone(s) _____
Name2 _____ Phone(s) _____

In consideration of being allowed to participate in any way in any Triangle Volleyball Club program, related event and activities, I the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death.
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.

My signature below, certifies that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kins, I release and agree to indemnify and hold harmless Triangle Volleyball Club, its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, from any and all claims, demands, losses, and liability arising out of or related to any injury, disability or death I may suffer, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Parent Name (please print)

Parent Signature

Date

Please return this form (both sides) to:

Triangle Volleyball Club
9301 Globe Center Drive, Suite 140
Morrisville, NC 27560

Please return registration form, payment, and medical release and liability waiver (reverse side) to secure your spot...thank you!