



Volleyball Skills Clinic

Phoenix College Volleyball will be holding a 3 day skills clinic for 7th – 12th graders. The clinic will be held at Phoenix College in the North Gym, July 29th through July 31st from 4pm to 7pm. The clinic will include skill review, drills, and game play. This is a great chance to learn the brush up on your skills before your school team tryouts! The proceeds will go to the scholarship needs of the Lady Bears Volleyball Team.

Registration Cost for Individuals: \$120 (\$40 per day)

Registration Cost for a team (6+ players): \$75 per player (\$25 per player per day)

Walk in Registrations Accepted

Questions??? **Email: angela.franke@phoenixcollege.edu**

To register for a clinic, complete the registration and waiver forms below and send with payment to:

Coach Angela Franke
Phoenix College
1202 W Thomas Rd
Phoenix, AZ 85013

***MAKE CHECKS PAYABLE TO: PHOENIX COLLEGE VOLLEYBALL**

Individual Team _____ # of players (please circle one)

Name _____

Address _____

City _____ Zip _____ Home _____

Phone _____

Grade Entering _____

Email _____

School _____

Total Payment Enclosed: _____

**WAIVER AND RELEASE BY PARENT OF MINOR CHILD FROM LIABILITY FOR PHOENIX
COLLEGE VOLLEYBALL**

I, _____, on behalf of _____
(hereinafter referred to as "CHILD") HEREBY WAIVE AND RELEASE, indemnify, hold harmless and forever discharge Phoenix College and its agents, employees, officers, directors, affiliates, successors and assigns, of and from any and all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damages and liabilities, of every kind and nature, whether known or unknown, in law or equity, that I or CHILD ever had or may have, arising from or in any way related to CHILD'S participation in any of the events or activities conducted by, on the premises of, or for the benefit of, Phoenix College provided that this waiver of liability does not apply to any acts of gross negligence, or intentional, willful or wanton misconduct.

I understand that the activities that said CHILD will participate in are inherently dangerous and may cause serious or grievous injuries, including bodily injury, damage to personal property and/or death. On behalf of myself, CHILD, my heirs, assigns and next of kin, I and said CHILD waive all claims for damages, injuries and death sustained to me or my property, that I or said CHILD may have against the aforementioned released party to such activity.

By this Waiver, I, on behalf of said CHILD, assume any risk, and take full responsibility and waive any claims of personal injury, death or damage to personal property associated with Phoenix College, including but not limited to engaging in volleyball games, training at the facility, using the facility and its equipment, practicing and/or engaging in volleyball tournaments, house leagues or other related activities on and off the premises.

The provision of this WAIVER AND RELEASE will continue in full force and effect even after the termination of the activities conducted by, on the premises of, or for the benefit of, Phoenix College whether by agreement, by operation of law, or otherwise.

I have read, understand and fully agree to the terms of this WAIVER AND RELEASE. I understand and confirm that by signing this WAIVER AND RELEASE said CHILD and I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liability to the full extent of the law.

Medical Conditions. CHILD is subject to the following allergies or medical conditions, and I authorize the facility to disclose these conditions to a physician or other medical professional in the event said CHILD should require emergency medical care: _____

Printed Name of Parent (Guardian)

Date

Signature of Parent (Guardian)