

# Texas Tigers Volleyball Cub Camp

PO BOX 681, SEGUIN, TEXAS 78156  
210.241.6035 txtigervbc@yahoo.com

Our program is low-pressure where having fun and skill development is the main focus. Ages 8-12 are invited to develop/improve their volleyball skills. **ALL SKILL LEVELS ARE WELCOME!**

Athletes will be divided by skill level (not age) and work with various experienced CLUB COACHES. Each week athletes will be re-evaluated and regrouped as necessary.

The fourth week camp will run until 7:30 to allow for games/scrimmaging.

Camp will be held at:

**Tiger Sports Complex**  
**2818 Cordova Road, Seguin, Tx 78155**

**Camp will begin Tuesday, April 2<sup>nd</sup> and run for 4 weeks.**

**Camp will run 5:45-7:15p on 4/2, 4/9, 4/16, 4/23**

**SATURDAY, March 30th IS THE DEADLINE FOR RETURNING  
THIS APPLICATION WITH THE \$55 REGISTRATION FEE!**

**Space limited to 50 participants!**

\*\* All LATE applications will be put on a waiting list and participation will depend on space availability  
Questions? Please contact Kelle Sullivan 210.241.6035

Mail the entire application and money to **Tiger Sports Complex, PO Box 681, Seguin, TX 78156** or you may drop off at Crossfit Gym or Tiger Gym on Cordova Rd. Please put envelope in white lock box just inside personnel door.

Name of Player: \_\_\_\_\_

Address: \_\_\_\_\_ School: \_\_\_\_\_

City: \_\_\_\_\_

Hm Ph #: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Ph #: \_\_\_\_\_

**Circle Shirt Size: YS YM YL AS AM AL**

**My/Our daughter is \_\_\_\_ years old as of Sept. 1, 2018 and is in the \_\_\_\_ grade.**

I/We, the parents of the above named player do hereby give my/our permission to him/her participation in any or all of the coming season. I/We do assume all the risks and hazards incident to the conduct of the activities, transportation to and from the activities, and I/we do further release, absolve any or all of them in case of injury to my/our daughter. I/We hereby waive all claims against the organizers, the sponsors, supervisors, coaches, referees, or other agents or employees of the Tiger Sports Complex, Texas Tigers Volleyball Club, FKSS, and including, but not limited to, claims for negligence or lack of ordinary care.

**(This must be signed by both parents if applicable.)**

\_\_\_\_\_  
Father's/Guardians Signature

\_\_\_\_\_  
Mother's/Guardians Signature

\_\_\_\_\_  
Please print name here.

\_\_\_\_\_  
Please print name here.