Redington Volleyball Club invites you Fundamental Training

When: Saturday Sessions



<u>Who:</u> Open to any athlete Ages 6-14. Girls and boys in any school district are welcome. Athletes must not be a member of any other USA Volleyball club. The sessions are designed for athletes that are just learning volleyball.

Where: Christ Presbyterian Church 6565 E Broadway Blvd Tucson, AZ 85710

<u>Time:</u> 9:00 AM-11:00 AM	
<u>Cost:</u> \$20	
Athlete Name:	Birth date (day month year)
School Athlete Attends:	Grade going in to 2024-2025:
Parent/Guardian Name	Phone:
Address:	
City & State: ZIP: _	Email:
Experience playing volleyball:	
Any allergies: A	Any Health Restrictions or Concerns:
represent & warrant to you that the athlo knowledge of any physical impairment th gym program. I hereby authorize the staf judgment in any situation that may arise waive & release the club, support staff, a	to participate in the 2023 RVC Developmental Clinic. I ete is physically & mentally able to participate in all activities. I have no not not would be affected by the above named athlete's participation in the open of Redington Volleyball Club (RVC) to act for me according to their best during the sessions. In any emergency requiring medical attention, I hereby and any/all facilities, including potential transportation to a medical facility, gross negligence or willful misconduct. Insurance is not provided by Redington
PARENT/GUARDIAN SIGNATURE:	Date:
pictures of athletes and teams throughou	updates their website, Facebook page and promotional literature with at the season. I hereby agree that RVC and coaches may use images of website or in promotional literature. These images may include, but are not
limited to, photographs, video, and other Facebook page, promotional or information understand these images may be used by	r multimedia images. RVC and coaches may use these images on its website, ional literature and any other medium related to the function of RVC. I RVC and coaches, in conjunction with its sponsors. I agree to indemnify and and coaches from and against any and all liability arising out of or in any way
PARENT/GUARDIAN SIGNATURE:	Date:

***Please send form with cash or check payable to: **Redington Volleyball Club** (We also accept Zelle)

For more information, contact: Club Director - Devon Hughes: 623-313-6491 or redingtonvolleyball@gmail.com