Tropical Touch VBC • Registration Form
Oct 2026 • Girls & Boys Indoor Clinic

Campbell (CCC) & Bascom Community Center (BCC)
(check web site for latest schedule)

- All ages
- Walk-ins welcome
- Please arrive 15 minutes prior to start time

14 days for Oct: Bascom: 5:30-8:00p

Tuesdays 6, 13, 27
Thursdays 1, 8, 15, 22, 29
Saturdays 3, 17, 24 9:00a-12:00p (Campbell)

8:30a-10:45a
Sundays 4, 18, 25

PLEASE PRINT

Player Info

First name _____ Last name _____ Age _____ Date of birth _____

Parent/guardian name _____

Address, City, ZIP Code _____

Email address (for club communications) _____ Cell number _____

Emergency contact (if different than above) _____ Cell number (if different than above) _____

FEE (Non-refundable):

$25/day for club members ($280 for all 14 days – Save $70**)**
$50/day for non-members ($620 for all 14 days – Save $80**)**

Make check payable to: **Tropical Touch Volleyball Club**
(Zelle 408.455.6276, cashier's check, and cash also accepted)

I hereby authorize the Tropical Touch Volleyball Club staff to act on my behalf according to their best judgment in any emergency requiring my child to receive medical attention. I hereby waive and release Tropical Touch Volleyball staff, Campbell Community Center staff, Directors, and Volunteers from all liability for any injuries sustained by my child while participating in the Tropical Touch Volleyball clinic. Furthermore, I have no knowledge of physical impairment in my child, which would be affected by participation in the Tropical Touch Volleyball clinics.

Parent/guardian signature _____ Today's date _____

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Updated: Mon, Mar 16, 2026