

**Summer Indoor VB Clinic Registration Form**

 *You must arrive 20 minutes prior to start time*

 **Date: Tuesdays: June 17th, 24th and July 1st -- Time: 5:00 – 7:00 PM**

 **Date: Thursdays: June 19th, 26th and July 3rd -- Time: 5:00 – 7:00 PM**

 **Date: Saturdays: June 21st -- Time: 9:00 – 12:00 PM**

 ***\*\* This is 15 hours of training…2 hours per day for 7 days \*\****

 **Location: Main gym CC All Ages, Walk-ins welcome**

**PLEASE PRINT:**

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 Player’s First Name Player’s Last Name

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 Parent’s Name or Guardian Player’s Date of Birth Player’s Age

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 Address City Zip Code

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 Email address – required for all club communications Cell Number

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 Person to contact in case of Emergency Cell Number

Fee (*Non-Refundable*) Cost: TTVBC Membership $450.00 / $64.00 per day

 Non-Membership $570.00 / $81 per day

Make Check Payable to: We accept credit cards, Zelle, Venmo, and checks (made out to Tropical Touch). There is a fee for credit card payments.

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 do not know of any physical impairment in my child that would be affected by participation in the Tropical Touch Volleyball clinics.

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**Signature of Parent or Guardian Date**

**Contact: Lila Plunkett at (408) 455-6276 or email: tropicaltouchyvbc@gmail.com**