Insurance Release Form
Applications will not be accepted without completion of this portion of the application

I, the undersigned, as the parent or legal guardian of	
the minor child,	
hereby acknowledge that the above named child is covered	
by medical insurance as follows:	
Insurer:	
Company:	
Policy #:	
I as parent or guardian haraby sive permission for my	
I, as parent or guardian, hereby give permission for my	
child to participate in the volleyball camp and acknowledge	
the fact that he/she is physically able to participate in camp	
activities. I hereby authorize the camp staff to act for me	
according to their best judgment in any emergency	
requiring medical attention. I acknowledge that I may be	
responsible for any cost (through family medical insurance	
or otherwise) incurred due to sickness or injury to my	
son/daughter. I hereby waive any claim I might have	
against the camp, director, or the institutions providing the	
facilities	

This athletic camp follows guidelines set forth by Fort Bend ISD and the UIL.

Parent/Guardian Signature:

Date:



## Ridge Point 2018 Volleyball Camp

Make checks payable to: Ridge Point Volleyball

Mail to Lori McLaughlin c/o Ridge Point High School 500 Waters Lake Blvd. Missouri City, Texas 77459

This organization and its activities are not related to or sponsored by Fort Bend Independent School District.

# Ridge Point 2018 Volleyball Camp

June 4—June 7, 2018

8:00 AM—11:00 AM BEGINNER SKILLS CAMP \* for girls/boys entering grades 6-8

12:00 PM—2:00 PM SKILLS CAMP \* for girls/boys entering grades 1-5

2:30 PM-5:30 PM HIGH LEVEL/ADVANCEDCAMP \* team & skill oriented drills for girls/boys entering grades 6-8

> Ridge Point High School 500 Waters Lake Blvd. Missouri City 77459

Camp Director: Lori McLaughlin 281-327-5291 office lori.mclaughlin@fortbendisd.com

### 2018 Ridge Point HS Volleyball Camp

**<u>Dates:</u>** June 4 – June 7, 2018

**Grades:** 1st—8th graders

Place: Ridge Point High School Gyms500 Waters Lake Blvd.Missouri City, Tx 77459

<u>Time:</u> 8:00–11:00 AM (Beginner Skills Camp: for 6th–8th grade)

12:00-2:00 PM (1st-5th grade)

2:30–5:30 PM (High Level/Advanced Camp: team oriented drills for 6th–8th grade)

**Cost:** \$60.00 (1st—5th graders)

\$80.00 (6th-8th graders) \*Beginner or Advanced\*

#### Make checks payable to:

Ridge Point Volleyball

#### Return the completed application to:

Lori McLaughlin

c/o Ridge Point High School

500 Waters Lake Blvd.

Missouri City, Texas 77459

All applications and fees must be received by:

#### May 25, 2018

Late registration and walkups will be on Monday,

June 4 from 7:00 A.M. - 7:45 A.M.

#### Camp Staff and Instruction Info

Camp Director:

Lori McLaughlin

#### Ridge Point Head Volleyball Coach

Coach McLaughlin is a graduate of Putnam City North HS in Oklahoma City where she was a 3-year letterman in volleyball. In high school, she received numerous All Tournament Honors and was selected to the All State Team where she received MVP at the All State Game. She played collegiate volleyball for 4 years. The first 2 years at Seward County Community College in Liberal, KS and the last 2 years at Midwestern State University in Wichita Falls, Tx.

Coach McLaughlin will begin her seventeenth year as a head coach and sixth year at Ridge Point High School for the 2018 volleyball season.

Ridge Point Volleyball Staff Members
Former and current players
Feeder Middle Schools Coaches

#### Camp Instruction will focus on the following:

Individual Skills

Transition

Serve Receive

Rotation

Defense

Communication

Team Building

Having Fun



#### <u>20168Ridge Point Volleyball Camp</u> <u>Application</u>

Name:	
Address:	
City/Zip:	
Home Phone:	
E-mail Address:	
Male: Female:	
Grade in 2018 - 2019:	
Camp Fee: Please mark w	which session you want to attend
\$60.00 (1st—5th gra	iders)
* \$80.00 (Beginner S	kills Camp 6-8 graders)
* \$80.00 (High Level	/Advanced Skills Camp
6-8 grade	rs)
T-shirt Information (se	elect one)
Youth Small	
Youth Medium Youth Large	Method of Payment
Adult Small	Check No:
Adult Medium	☐ Cash
Adult Large	
Adult X-Large	
Parent/Emergency Conta	act Name:
Daytime/Cell Phone Nur	mber:

\*Please complete the insurance form \*