



2021 GIRLS VOLLEYBALL CAMP



The Bellport High School Volleyball Team is offering a Volleyball Camp this summer designed specifically for girls!!

DIRECTORS: Larry Auth – Bellport Volleyball Coach
Ellen Hoffman - Bellport Volleyball Coach
Cassandra Watson – Bellport Volleyball Coach

STAFF: High School Coaches and College volleyball players
DATES: Mon. June 28th through Thurs. July 1st
Mon. July 12th through Thurs. July 15th
SITE: Bellport High School, Brookhaven

ENROLLMENT IS LIMITED TO 60 APPLICANTS

9:00 a.m. – 12:00 p.m. (Session 1 – 4 days)

9:00 a.m. – 12:00 p.m. (Session 2 – 4 days)

SESSION 1	Girls entering 4 th through 8 th grade as of 9/21	June 28th – July 1st
SESSION 2	Girls entering 8 th through 12 th grade as of 9/21	July 12th – July 15th

CAMP COST: \$100 Pre-registration Program (Up to June 21st) Includes: T-Shirt
\$110 (After June 21st up to start of camp) (if preregistered)

NO REFUNDS AFTER THE FIRST DAY OF CAMP

questions regarding the program call: 631-965-1933 or ehoffman@southcountry.org or
631-252-4493 or cwatson@southcountry.org

Make checks payable to: **Bellport High School (please include phone number on check)**
Send checks to: Ellen Hoffman Cassandra Watson
CASH IS PREFERRED 8 Country Club Rd. 51 Cooks Rd.
Bellport, NY 11713 East Patchogue, NY 11772

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VOLLEYBALL CAMP 2021

PLEASE CIRCLE T-SHIRT SIZE: (ADULT SIZES ONLY) SM. MED. LG. XL.

Name _____
Address _____
Town _____
Phone # _____ Date of Birth _____ Age _____
New Player _____ Returning Player _____
Grade Entering 9/21 _____

CIRCLE SESSION:
Session 1 - 6/28 – 7/1, 4th – 8th
Session 2 7/12– 7/15, 8th – 12th

Registration and Insurance Fees are Non-Refundable

I/We, the parents of the above named child, hereby give consent for participation in the activity and do claim that he/she is in perfect physical condition to participate in said activity. Furthermore, I/we, the parent(s) of the above named candidate for a position on a league team hereby give my/our approval to his/her participation in all league activities during the current session. I/We assume all risks and hazards incidental to such participation including transportation to and from the activities; and I/we do hereby waive, release, absolve, indemnify and agree to hold harmless the South Country School District., associated organizations, the organizers, sponsors, supervisors, participants and persons transporting my/our son/daughter to or from activities, for any claim arising out of an injury to my/our son/daughter, except to the extent and in the amount covered by accident or liability insurance.

Parent(s)/Guardian Signature _____

Date _____

Parent email _____