

EMU VOLLEYBALL CAMP

Presented by Steve Benson, Head Volleyball Coach at Eastern Mennonite University
and Benson Volleyball Inc.

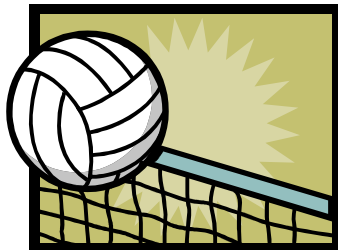
- When:** June 13th – 16th 2008
Where: Eastern Mennonite University, Harrisonburg VA (University Commons bldg.)
How much: \$300 for overnight, \$260 for commuters (includes breakfast, lunch & dinner)
(*\$100 deposit due by May 15th to reserve your spot*)
Who: Girls entering the 7th grade up to 12th grade.
What: Eight sessions of practice and play where all techniques will be covered!

June 13th

- Check-in between 4-5 at the University Commons, lower level
- Dinner 5-6pm
- Gym 6:30-8:30pm

June 15th

- Breakfast
- Gym 9-11am
- Lunch
- Gym 2-4pm
- Dinner
- Gym 6:30-8:30pm



June 14th

- Breakfast
- Gym 9-11am
- Lunch
- Gym 2-4pm
- Dinner
- Gym 6:30-8:30pm

June 16th

- Breakfast (Check-out)
- Gym 9-11am
- Camp ends 11:30am

EACH CAMPER WILL RECEIVE A CAMP T-SHIRT

Each overnight camper should bring: shoes, socks, shorts or spandex, t-shirts, knee pads, pillow case sheets (twin bed), towels, money, toiletries, notebook and pen/pencil

Head Volleyball Coach, Steve Benson, will be directing the camp along with current and former college players.

Please return with a check made out to: Benson Volleyball Inc.

Name _____ Grade Entering _____ Age _____

Address _____

City _____ State _____ Zip _____

E-mail _____ Roommate for camp _____

Any medications or allergies: _____

(Please Circle One): On Campus (\$300) or Commuter (\$260)

(Please Circle One): \$100 deposit by May 15th or Full Amount (\$300 or \$260)

(Please Circle One): T-Shirt Size (adult sizes) S M L XL

I herby request that my daughter, or ward, be admitted to EMU Volleyball Camp, run by Benson Volleyball Inc., and authorize the directors to act for me according to their best judgments in any emergency requiring medical attention for services I shall pay. I understand that by signing this, I release EMU, Benson Volleyball Inc., its directors and employees and contractors, from all liability for accidents and illness. I also confirm that my daughter is physically able to perform in EMU Volleyball Camp and possesses adequate health insurance.

Parent or Guardian Signature _____ Date _____

Phone numbers: (Home) _____ (Cell or Office for Emergency) _____

Please make checks payable to Benson Volleyball Inc. for \$300 (on campus) or \$260 (commuter)
OR mail \$100 deposit by May 15th to reserve your spot...please add \$25 after May 15th
If mailing deposit, please pay the balance at camp sign-in...no refunds on deposits after June 1st!

Please send checks and camp form to: Steve Benson, EMU Volleyball Camp
Eastern Mennonite University
1200 Park Road
Harrisonburg, VA 22802

Any questions, contact Steve Benson at steve.benson@emu.edu or 540-432-4331