



**Small Multi-Sports Center:**

**600 1st St**

**Mount Vernon, IA**

**June 17th—June 21st**

**Register online @**

**[www.ramvolleyballcamps.com](http://www.ramvolleyballcamps.com)**



**ACKNOWLEDGMENT & ASSUMPTION  
OF RISK & MEDICAL CONSENT FORM**

I, the undersigned camp/clinic athlete, do hereby expressly and affirmatively state that I voluntarily wish to participate in the following sport: \_\_\_\_\_ on the following date(s): \_\_\_\_\_. I realize that my participation in this activity inherently involves risk of injury, including but not limited to the following: death, neck and spinal injuries (which may result in complete or partial paralysis), brain damage, injury to internal organs, injury to the skeletal system, and injury or impairment to the body's general health and well-being.

In addition, I acknowledge that injury may also result in serious impairment of future abilities to earn a living, engage in other business, social and recreational activities, and generally enjoy life. These types of injuries may result from my own actions, the actions or inactions of others, or a combination of both. I understand that the rules and regulations are designed for the safety and protection of participants and I hereby agree to abide by the rules and regulations administered by the camp/clinic staff. I also understand that certain activities require a minimum level of fitness for safe participation. I acknowledge that I fully understand the contents of this Acknowledgment and Assumption of Risk statement before signing the same and have had an opportunity to ask questions. All questions I have asked have been answered to my complete satisfaction. Having done so, I agree to assume any and all potential risks of these activities and agree to hold Cornell College, its officers, employees and agents harmless for liability as it relates to this activity. I hereby grant permission to the Cornell College camp/clinic staff, team physician, athletic trainers and other medical personnel to render aid, emergency treatment, medical or surgical care, preventative care, or rehabilitative care deemed reasonably necessary to my health and well being.

Athlete Signature/Date: \_\_\_\_\_

Parent(s) or Legal Guardian Signature/Date:  
\_\_\_\_\_

Phone in case of emergency: \_\_\_\_\_

Home: \_\_\_\_\_

Work: \_\_\_\_\_

Cell: \_\_\_\_\_

**Cornell College  
Volleyball Camps  
2019**



## Skills Camp

Entering 5-12th grades

**Monday-Thursday**

**June 17th-20th**

8:30-11:00 a.m.

**or**

1:30-4:00 p.m.

*Choose a morning or afternoon session.*

Focus on skill development with progression to team concepts. We also focus on teaching important behaviors for volleyball success. Our goal is to create an exciting learning environment where campers work hard to become better volleyball players.

Camp t-shirt awarded

**Camp Fee \$100**

## Little Rams Camp

Entering K- 4th grades

**Monday-Thursday**

**June 17th-20th**

6:30-7:30 p.m.

Introduction to the game of volleyball. Focus on the basic fundamentals of movement, passing, setting, serving and spiking. Game modifications, associated games and a focus on fun provide for excellent early exposure to volleyball.

Camp t-shirt awarded

**Camp Fee \$40**

## Elite Development Clinic

Entering 9th-12th grades

**Friday, June 21st**

8:30-11:30 a.m.

1:00-4:00 p.m.

Intensive day clinic for varsity caliber athletes. More repetitions, faster tempo, emphasis on position specific development. Sport Psychology sessions and team development strategies included.

Lunch will be provided for campers.

Camp t-shirt awarded

**Camp Fee \$100**