

2026 Ram Volleyball Camp!

Instructors - Bretta Hagerty & Tinora VB Staff



When: June 15th-16th-17th

7th & 8th Graders -09:00 -10:30

3rd - 6th Graders -10:30 -12:00

**Grade Levels - fall of 2026*

Where: Tinora High School Gym

Cost: \$45.00

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

_____ Session 1: 7-8 graders

_____ Session 2: 3-6 graders

Camp T Shirt Size:

Youth - S M L XL

Adult - S M L XL Circle Size

Return Form & Check to your school office. Make checks payable to: Tinora Athletic Boosters

Name of Participant: _____

In consideration of my child being permitted to participate in the Tinora Volleyball Camp, I, intending to be legally bound, do hereby for myself, my personal representative, heirs, and next of kin, release, waive, and forever discharge, and covenant not to sue Northeastern Schools, the Northeastern Board of Education, Northeastern staff, or any of their employees, instructors, volunteers, agents and others who are involved in this activity, from all liability and for all loss or damage and any claim of damage, on account of injury or death to my child or property whether caused by negligence or otherwise while participating in the Tinora Volleyball Camp. I hereby state that my child is physically and mentally able to participate in the above referenced activity and has no health problems that would present risk in participating in this activity. I hereby give permission for transportation to any medical facility or hospital and I authorize any qualified medical personnel to render necessary emergency medical care for my child. I also understand that any participant who does not abide by the rules and regulations set forth by the camp and/or Northeastern Schools is subject to dismissal without reimbursement or recourse.

Print Name of Parent/Guardian:

Signature of Parent/Guardian and Date:
