Team Camp

Be a step ahead of the competition

Mizzou's 2012 TEAM CAMP allow teams to work together by playing matches against each other in order to develop skills and chemistry prior to the beginning of the season!

*** Varsity and Junior Varsity positions** ***Competitive Team play form** ***Team Practices**
***13 Consecutive years** ***One of Missouri's longest running Team Camps**

Individual Camps

Designed specifically for athletes wanting to focus on the fundamentals of the game. Athletes are drilled in all skill areas including: setting, blocking, serving, attacking, and individual defense. In addition, instruction in team offensive and defensive systems will be incorporated through team play.

- Skill instruction in ALL FACETS of the game.

Positional Camps

Feature concentrated instruction for the athlete who wishes to focus on a designated position (setter, outside hitter, middle hitter, or Libero/ defensive specialist). Campers will spend the majority of their time drilling on those skills unique to their chosen position. Team play is also provided to incorporate individual skill development into team offensive and defensive systems.

REGISTER ONLINE AT WWW.MUTIGERS.COM

UNIVERSITY OF MISSOURI VOLLEYBALL CAMPS 2012

TIGER VOLLEYBALL
University of Missouri
395 Hearnes Center
Columbia, MO, 65211

MIZZOU VOLLEYBALL

Greetings from Mizzou!

Thank you for your interest in Missouri Volleyball and our 2012 Summer Camp program. Your experience at our summer camp will be filled with expert instruction, non-stop action, and plenty of fun! Here at Missouri, we pride ourselves on running a well-organized and structured camp that will allow you to maximize your learning potential. At the same time, we work hard to foster a love for the game that will last long after your competitive playing days are over!

The popularity of Missouri Summer Volleyball Camps is the result of outstanding organizations, great facilities, and a great camp staff. We personally supervise each camp, and in addition, we employ proven teachers of the game to guarantee each camper a great camp experience.

Come find out why Missouri Volleyball Camps are among the most popular in the country. We look forward to seeing you this summer!
Sincerely,

Wayne Kreklow
Missouri Head Coach
Camp Co-Director

Susan Kreklow
Missouri Director of Volleyball
Camp Co-Director

2012 MISSOURI VOLLEYBALL CAMP REGISTRATION

This form must be filled out and signed by the appropriate people and mailed to the University of Missouri Volleyball Dept. before participation in the camp will be allowed. If information is not complete, the form will be returned to you. Upon receiving the completed application form and payment, a confirmation e-mail will be sent to you. Camps are open to any and all entrants limited only by age, grade level, gender, and/or number.

Camper's Name_____

Age in June '12: _____ School Grade next year: _____ Birthdate: _____ Height: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Home Phone: _____

Parent(s) Name: _____ Work Phone: _____

E-mail Address: _____

School/ Team Name: _____

Coach's Name: _____ Coach's Home Phone: _____

Coach's e-mail: _____

Existing Medical Problems: _____

Roommate Preference: _____

Adult T-shirt size (Circle One): S M L XL

If you have any questions, feel free to contact at (573) 882- 0726 or www9n9@mail.missouri.edu. Or register online at www.mutigers.com.

Individual Camps

__ Residential ($320) __Commuter ($255)

__ June 7-9 __ July 10-12 __ July 16-18

Positional Camps

__ Residential ($320) __Commuter ($255)

__ June 7-9 __ July 10-12 __ July 16-18

Position (Circle One): OH MB S L/DS

Team Camp

__ Residential ($275) __Commuter ($225)

July 13-15

Team _____

Circle One: Varsity Junior Varsity

INDEMNIFICATION BY PARENTS OR GUARDIANS OF APPLICANT

I/We the parents of _____ hereby give my/ our approval for her participation in any and all activities of the University of Missouri Volleyball Camp(s) for which my child is enrolled. I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the Camp, its directors and its staff. I/We grant permission for her to participate in the Camp and acknowledge she is physically able to participate in Camp Activity.

_____

Signature of Parent or Guardian Date

MEDICAL TREATMENT AUTHORIZATION

I/We, being the parents or legal guardians of the applicant, authorize the University of Missouri and its agents permission to request emergency medical treatment or care as necessary to ensure the well being of our dependent. Further, I/We claim that the registrant has had a physical examination in the past year and was found fit for all physical endeavors.

_____

Signature of Parent or Guardian Date

Are you or your dependents entitled to benefits under any employer, union, group plan, Blue Cross/Blue Shield, Medicare, Medicaid, or any other governmental programs? ____ Yes ____ No If yes, complete the following:

Employer/ Sponsoring Organization: _____ Person carrying insurance coverage: _____

Insurance Co. _____ Policy Number: _____

Address; _____ City _____ State _____ Zip Code _____

Permission return form with check made payable to:
Tiger Volleyball, University of Missouri, 395 Hearnes, Columbia, MO

Participates may also register online at www.mutigers.com (click on "volleyball", then click the "camp" link)

REFUND POLICY: Parties who wish to cancel registration will receive 100% of their entry fee if the cancellation occurs prior to May 7th, 2012. After May 7, a doctor's notice or documentation of a family emergency must be provided by parties who wish to cancel in order to receive their additional fee minus $50.

The NCAA prohibits any MU booster (other than parent, legal guardian or close family member) from paying any portion of a camper's camp fees or transportation.