

Hello,

The Dordt Women's Volleyball program is hosting a GIRLS volleyball clinic on Saturday, February 16 from 9:30a-11a in the Rec Center at Dordt. Girls currently in grades 3-6 can participate. Cost is \$10 and includes a free t-shirt. Check-in at 9am.

The Dordt Men's Volleyball program is hosting a BOYS volleyball clinic on Saturday, March 23 from 9:30a-11a in the Rec Center at Dordt. Boys currently in grades Kindergarten-12th can participate. Cost is \$10 and includes a free t-shirt. Check-in at 9am.

Register by completing the attached PDF and emailing it to Alex.Durbin@dordt.edu. Payment will be received when you arrive for the clinic. Checks can be payable to "Dordt Volleyball."

Hoping to see your son or daughter soon!

Chad

Chad Hanson
Head Volleyball Coach

DORDT COLLEGE

www.dordt.edu

712.722.6320 Office

712.449.5233 Cell

Skype: dordtvbch

498 Fourth Ave NE

Sioux Center, IA 51250



Dordt Volleyball Youth Boys Clinic



Dordt College Recreation Center
March 23, 2019
9am Check-In

Double Click Text Boxes to Edit

GENERAL INFO:

Name of Athlete: Text Parent/Guardian Name: Text

Current Grade: Text T-Shirt Size: YM YL S M L XL
("X" one Box)

CONTACT INFO:

Email: Text Phone: Text

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, Text, parent/guardian of Text (Participant), acknowledge that I have voluntarily agreed for my child to participate in the Volleyball Clinic to be held March 23, 2019 on the Dordt College campus in Sioux Center, Iowa.

I AM AWARE THAT PARTICIPATING IN THE CLINIC IS HAZARDOUS AND THAT THEY COULD BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY. THEY ARE VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH THE KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

As consideration for being permitted to participate in this clinic, I forever release Dordt College, and its respective directors, officers, employees, volunteers, agents, contractors and representatives from any and all actions, claims, or demands that I, my assignees, heirs, distributes, guardians, next of kin, spouse or legal representatives now have, or may have in the future for injury, death, or property damage, related to (i) their participation in the clinic, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused or (iii) the condition of the facilities where these activities occur, whether or not they are then participating in the activities.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND DORDT COLLEGE.

X Text

Date: 3/23/2019

Parent/Guardian Signature



Dordt Volleyball Youth Girls Clinic



Dordt College Recreation Center
February 16, 2019
9am Check-In

Double Click Text Boxes to Edit

GENERAL INFO:

Name of Athlete: Text Parent/Guardian Name: Text

Current Grade: Text T-Shirt Size: YM YL S M L XL
("X" one Box)

CONTACT INFO:

Email: Text Phone: Text

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X Text

Date: 2/16/2019

Parent/Guardian Signature