

# GFCC Mustang Volleyball Camp



For kids entering grades 3<sup>rd</sup>-8<sup>th</sup> in the 2019/2020 school year

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**When:** June 18<sup>th</sup> – 20<sup>th</sup>

**Time:** 8-12 AM



**Where:** GF Central Catholic gymnasium

**Camp Director:** Danielle Woods, GFCC HS Head volleyball coach

**Coaches:** Lexi Bremer, GFCC HS assistant coach; Shirley Woods, GFCC HS assistant coach;  
Sara Tarum, current UP Argo volleyball player & former/current GFCC HS players

**Camp Info:** Camp will emphasize basic/advanced fundamentals and footwork in the areas of: setting, attacking, passing, serving, digging and blocking. Camp will also include specific position work, defensive systems, competitive & fun games.

**What to Bring:** Clean tennis shoes, knee pads (highly recommended) and a water bottle.

**Cost & Registration:** \$60/camp participant which includes instruction, a FREE Mustang volleyball camp t-shirt, snacks, drinks & prizes. There is a \$5 discount for each additional participant for families that have multiple participants. Please be sure to circle your t-shirt size!

**There is no registration deadline!! \*\*Walk-in's are welcome!!\*\***

**Make checks payable to:** GFCC Volleyball

**Mail registration form and payment to:** GFCC High School  
Attn: Danielle Woods  
2800 18<sup>th</sup> Ave South  
Great Falls, MT 59405

**Questions:** Contact Coach Woods at [dbaeth@greatfallscatholic.org](mailto:dbaeth@greatfallscatholic.org) or cell phone# 406-799-6340

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**GFCC Mustang Volleyball Camp Registration Form & Waiver**

(Please return completed form and payment to the address provided on the first page or bring with you to the first day of camp)

Name: \_\_\_\_\_ Grade entering (circle): 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Emergency Contact & phone number: \_\_\_\_\_

Allergies (if any, since we are providing snacks): \_\_\_\_\_

T-shirt size (circle): Youth- S M L XL Adult- XS S M L XL

*In consideration of Great Falls Central Catholic High School allowing my child to participate in this event, I now assume responsibility for and hereby release and agree to indemnify, defend and hold harmless the Roman Catholic Bishop of Great Falls, Montana, the Diocese of Great Falls-Billings, the above named school and its directors, volunteers and employees, from all damages, claims, suits, expenses and payments on account of and resulting from any injury, death or property damage suffered by me due to accident or occurrence during the event, that is not the result of any willing wrongful acts of any supervising school staff member(s), or any other employee or volunteer of the Diocese of Great Falls-Billings.*

Parent/Legal Guardian Name (Please print): \_\_\_\_\_

Parent/Legal Guardian Signature (Mandatory): \_\_\_\_\_ Date: \_\_\_\_\_

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