2011 Junior Owls Volleyball Camp  
July 29th & 30th

The MPI Athletic Department is pleased to offer the 2011 Junior Owls Volleyball Camp for incoming MPI 4th, 5th and 6th graders this summer. The camp will take place on the MPI outdoor volleyball courts.

Camp Description:
The 2011 Junior Owls Volleyball Camp for boys and girls is based on learning volleyball fundamentals which can be applied to playing school, club or recreational volleyball. The coaches will stress the importance of learning proper techniques in a fun atmosphere. Skills that will be covered include, but are not limited to: passing, setting, attacking, and serving. This camp is an excellent opportunity for young players to discover the excitement of playing volleyball while interacting with the current Owls Volleyball Program coaches and players.

Staff:
The camp will be directed by Vernon Podlewski, MPI’s Girls Volleyball Head Coach and Carol Slusher, MPI’s Boys Volleyball Head Coach. Coach Slusher and coach Podlewski will be supported by members of their coaching staff and several current MPI high school volleyball players.

Camp Details:

Dates: Friday, July 29 & Saturday, July 30

- 1st Session 1:00PM - 3:00PM
- Snack 3:00PM – 3:30PM
- 2nd Session 3:30PM - 5:30PM

Additional Information:
Each camper will need to bring each day:
- Volleyball attire (including knee pads
- Towel and water bottle

Registration & Fees:
- Only returning and incoming MPI students qualify to participate
- Registration deadline: Monday, July 1, 2011 – camp fees must be paid prior to the start of the camp
- The Junior Owls Volleyball Camp fee is: $40.00
- The fee includes snacks & drinks, a volleyball and a camp t-shirt
- Make checks payable to: MPI Athletics; Memo: Junior Owls Volleyball Camp
- Campers must have medical insurance
- Camp limit: 50 participants (selected on a first come, first served basis)

Contact:
- Girls Head Coach Vernon Podlewski - (217) 691-6975 (cell) or vernon808@hotmail.com
- Boys Head Coach Carol Slusher - (808) 284-3292 (cell) or cslusher@hawaii.rr.com
2011 Junior Owls Volleyball Camp  
-Registration Form-

Camper’s Name: ___________________________________________  □ Male  □ Female

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<th>Last</th>
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<th>Middle Initial</th>
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Shirt Size:  
(please circle)  
YS  YM  YL  AS  AM  AL  AXL

Address: ____________________________________________________________________________

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<th>City</th>
<th>State</th>
<th>ZIP Code</th>
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Date of Birth: ___________________  (MM/DD/YY)

Incoming Grade (please circle):  
1  2  3  4  5  6

Father’s Name: ___________________________________________  Telephone: __________________________

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Mother’s Name: ___________________________________________  Telephone: __________________________

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Parents’ Email: ____________________________

Emergency Information:

Emergency Contact ___________________________________________  Relationship: ___________________________

(Other than parent or guardian)

Telephone: __________________________

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Name of Physician: ___________________________________________  Telephone: __________________________

(For referral)

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Medical Insurance: ____________________________  Policy No.: ____________________________

I hereby give my consent for the above student to participate in the 2011 MPI Junior Owls Volleyball Camp. I acknowledge that he/she is physically able to participate in all camp activities. A physician may treat the above named student when necessary until arrangements can be made, and the coach or athletic trainer may render first aid if he/she is qualified to do so. In case of an emergency, I give permission for my child to be taken to the hospital. I fully understand that the student and the parent/guardian named on this form assume the risk for all injuries as a result of participation in the camp and must provide his/her own medical insurance. I further agree to release and save harmless Mid-Pacific Institute and its employees and agents, from and against all expenses, claims, and demands arising out of or in connection with the student’s participation in the 2011 MPI Junior Owls Volleyball Camp. I also agree to be fiscally responsible for any lost or negligently damaged athletic equipment or MPI facilities.

Date: ___________________________  Signature of Parent(s)/Guardian(s): ____________________________

Please return completed registration forms including the $40.00 payment to:

MPI Athletics, 2445 Ka’ala St, Honolulu, HI 96822.

Incomplete paperwork will not be processed!