



REGISTRATION FORM
PVHS Girls Volleyball Summer Camp

NAME _____

ADDRESS _____

EMAIL _____

HOME PHONE _____

OTHER PHONE _____

MOTHER'S NAME _____

FATHER'S NAME _____

BIRTHDAY _____

GRADE LEVEL IN SEPT. 2010 _____

-----SPACE IS LIMITED: REGISTER NOW-----

To Sign Up: Send in your check for \$325 made payable to **PVHS Summer Athletic Program (memo girls volleyball)**, this **Registration Form** and **Parent Consent Form** to:

Palos Verdes High School – Girls Summer Volleyball
600 Cloyden Rd
Palos Verdes Estates, CA 90274

Call or Email Coach Dyer at 310-266-7480 and at **pvhsgirlsvolleyball@gmail.com** to ask any questions.

***A \$25 FEE WILL BE CHARGED FOR ALL REFUND REQUESTS**