

# SAVE THE DATE

## *ALAMO HEIGHTS VOLLEYBALL CAMP*

*Grades 3 – 6: June 4 – 7 ... 9am – 12pm ... \$100*

*Grades 7 – 8: July 23 – 26 ... 9am – 12pm ... \$100*

*9<sup>th</sup> graders: July 22 – 26 ... 9am – 12pm ... \$100*

QUESTIONS: COACH DORGAN – [tdorgan@ahisd.net](mailto:tdorgan@ahisd.net)

# 2018 ALAMO HEIGHTS VOLLEYBALL 2018



## YOUTH (3<sup>rd</sup> – 6<sup>th</sup>) VOLLEYBALL CAMP

Date: Monday, June 4<sup>th</sup> – Thursday, June 7<sup>th</sup>  
Time: 9:00 am – 12:00 pm  
Where: Mule Dome / Sky Gym (AHHS)  
Cost: \$100  
Attire: Athletic attire (including athletic footwear) w/ kneepads  
Misc.: Personal water bottles recommended ... drinking fountains available

Registration: Online: <https://www.rankonesport.com> (credit card)

Mail: Todd Dorgan / 150 East Fair Oaks / San Antonio, TX 78209

In-Person: AHHS Athletics Office / 150 East Fair Oaks / San Antonio, TX 78209

\*\*\*\*\* Please make checks payable to Todd Dorgan \*\*\*\*\*

\*\*\*\*\* Questions: Coach Dorgan [tdorgan@ahisd.net](mailto:tdorgan@ahisd.net) 210-705-9558 \*\*\*\*\*

Athlete's Name: \_\_\_\_\_

Grade in Fall 2018: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Email: \_\_\_\_\_

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

T-shirt: YL S M L XL

### Parent Waiver

*I, as parent or guardian of the above child, enroll her in the 2018 Alamo Heights Volleyball Camp. I hereby acknowledge that she is physically able to participate in camp activities and have listed any special medical needs that I know of at this time. I authorize in advance for the staff to act for me in their best judgment in case of an emergency that requires medical attention. I realize health insurance is my responsibility and not that of the 2018 Alamo Heights Volleyball Camp. I waive AHISD and the camp staff from liability for any illness, injury, or property loss my child may incur while attending the 2018 Alamo Heights Volleyball Camp.*

PARENT SIGNATURE: \_\_\_\_\_

# 2018 ALAMO HEIGHTS VOLLEYBALL 2018



## FRESHMEN VOLLEYBALL CAMP

Date: Monday, July 23<sup>rd</sup> – Thursday, July 26<sup>th</sup>  
Time: 9:00 am – 12:00 pm  
Where: Mule Dome / Sky Gym (AHHS)  
Cost: \$100  
Attire: Athletic attire (including athletic footwear) w/ kneepads  
Misc.: Personal water bottles recommended ... drinking fountains available

Registration: Online: <https://www.rankonesport.com> (credit card)

Mail: Todd Dorgan / 150 East Fair Oaks / San Antonio, TX 78209

In-Person: AHHS Athletics Office / 150 East Fair Oaks / San Antonio, TX 78209

\*\*\*\*\* Please make checks payable to Todd Dorgan \*\*\*\*\*

\*\*\*\*\* Questions: Coach Dorgan [tdorgan@ahisd.net](mailto:tdorgan@ahisd.net) 210-705-9558 \*\*\*\*\*

Athlete's Name: \_\_\_\_\_

Grade in Fall 2018: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Email: \_\_\_\_\_

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

T-shirt:        S                    M                    L                    XL

### Parent Waiver

*I, as parent or guardian of the above child, enroll her in the 2018 Alamo Heights Volleyball Camp. I hereby acknowledge that she is physically able to participate in camp activities and have listed any special medical needs that I know of at this time. I authorize in advance for the staff to act for me in their best judgment in case of an emergency that requires medical attention. I realize health insurance is my responsibility and not that of the 2018 Alamo Heights Volleyball Camp. I waive AHISD and the camp staff from liability for any illness, injury, or property loss my child may incur while attending the 2018 Alamo Heights Volleyball Camp.*

PARENT SIGNATURE: \_\_\_\_\_

# 2018 ALAMO HEIGHTS VOLLEYBALL 2018



## JUNIOR SCHOOL (7<sup>th</sup> / 8<sup>th</sup> grade) VOLLEYBALL CAMP

Date: Monday, July 23<sup>rd</sup> – Thursday, July 26<sup>th</sup>  
Time: 9:00 pm – 12:00 pm  
Where: Mule Dome / Sky Gym (AHHS)  
Cost: \$100  
Attire: Athletic attire (including athletic footwear) w/ kneepads  
Misc.: Personal water bottles recommended ... drinking fountains available

Registration: Online: <https://www.rankonesport.com> (credit card)  
Mail: Todd Dorgan / 150 East Fair Oaks / San Antonio, TX 78209  
In-Person: AHHS Athletics Office / 150 East Fair Oaks / San Antonio, TX 78209

\*\*\*\*\* Please make checks payable to Todd Dorgan \*\*\*\*\*  
\*\*\*\*\* Questions: Coach Dorgan [tdorgan@ahisd.net](mailto:tdorgan@ahisd.net) 210-705-9558 \*\*\*\*\*

Athlete's Name: \_\_\_\_\_ Grade in Fall 2018: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Email: \_\_\_\_\_

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

T-shirt:        S                    M                    L                    XL

### Parent Waiver

*I, as parent or guardian of the above child, enroll her in the 2018 Alamo Heights Volleyball Camp. I hereby acknowledge that she is physically able to participate in camp activities and have listed any special medical needs that I know of at this time. I authorize in advance for the staff to act for me in their best judgment in case of an emergency that requires medical attention. I realize health insurance is my responsibility and not that of the 2018 Alamo Heights Volleyball Camp. I waive AHISD and the camp staff from liability for any illness, injury, or property loss my child may incur while attending the 2018 Alamo Heights Volleyball Camp.*

PARENT SIGNATURE: \_\_\_\_\_