

Registration form: Volleyball Camp New Generation :July 20,21,22,23  
**2026** (Monday-Tuesday-Wednesday-Thursday)

❖ Parent/Guardian name: \_\_\_\_\_(please print)

❖ E- mail \_\_\_\_\_@\_\_\_\_\_

Name of participant: \_\_\_\_\_ girl-boy/

Family name: \_\_\_\_\_

Current address: \_\_\_\_\_

City / Municipality: \_\_\_\_\_ Postal code: \_\_\_\_\_

My son / daughter will be entering grade \_\_\_\_\_ in Sept. 2026.

Known allergies: \_\_\_\_\_

Medical condition: \_\_\_\_\_

❖ Parent / Guardian phone numbers: Home: \_\_\_\_\_

Cell: \_\_\_\_\_

Office: \_\_\_\_\_ Emergency number: \_\_\_\_\_

↓ **Participant: this will be my 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> or 4<sup>th</sup> participation at the NG camp**

👉 **T-shirt: (adult sizes) S – M – L – XL**

You would like to be in the same group with?



👉 What skills would you like to develop and improve?

\_\_\_\_\_

Date: \_\_\_\_\_

❖ Parent's / Guardian's signature: \_\_\_\_\_

👉 E transfer for \$340

Kindly send to: **rgrandmaison97@gmail.com**

**The waiver form needs to be sent with the registration**