



## “SUMMER NIGHTS” VOLLEYBALL CLINIC

**Where:** Valley View School, Watchung  
**When :** Tuesdays  
June 28<sup>th</sup>, July 5<sup>th</sup>, July 19<sup>th</sup>,  
July 26<sup>th</sup>, August 9<sup>th</sup>, August 16<sup>th</sup>  
**For:** 5<sup>th</sup> through 9<sup>th</sup> grade students  
**Time:** 6:00 PM to 8:00 PM  
**Cost:** \$275

This clinic is exactly what summer nights should be....evenings spent with friends and having fun. Come hang out, play some volleyball, and enjoy the competitions, and company!!

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**TO REGISTER: EMAIL MR. B AT MRBSSPORTSCAMPS@YAHOO.COM**

Camper's Name \_\_\_\_\_ Grade \_\_\_\_\_

Email \_\_\_\_\_ Cell # \_\_\_\_\_

Address \_\_\_\_\_

**CHECKS PAYABLE TO B-ACTIVE LLC OR VENMO AT MATT-BUGLOVSKY**

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Health Certification Statement: I hereby certify that my son/daughter is in good physical health and may participate in all camp athletic activities. This permission also constitutes release of liability on the part of the Borough of Watchung, Watchung Recreation, Watchung BOE, and Mr. B's Sports Camps and staff/or any of their employees for any accident, injury or any damage or loss incurred during this activity or any part of this program. Furthermore, my signature authorizes the camp staff to act using their best judgment in any emergency requiring medical attention.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_