

*2018 Montana Jr.  
Middle School Volleyball Camp  
July 6-10*

*Director*

*Wade Wells has coached throughout Montana at all levels. He is presently the director of the Montana Jr. Volleyball Club and coaches the Homeschool Knights.*

*Overview*

*The general concept of our MS Camp is to train players in all skills of the game.*

*Features*

- ^ We'll allow in a maximum of 36 players so there are only 12 per court.*
- ^ Camp t-shirt from Mojo Graphics*

*To Bring*

- > Water Bottle*
- > Kneepads (optional)*

*Eligibility*

*Girls entering the 7th & 8th grade*

*Session Fee*

*\$125*

*Schedule*

*S1: 11:00-1:30 Shrine Auditorium  
S2: 2:00-4:30 1125 Broadwater*

*Site*

*Enrollment*

*Because of the limited number being accepted you must contact me by email or cell in order to hold a spot in the camp. Once you are admitted complete the registration and send in with the fee. Make checks payable to Wade Wells.*

*Contact Info*

*Wade Wells  
3700 1/2 Old Hardin Rd.  
Blgs, MT 59101  
wellsww@icloud.com  
696.4139*

*Print Clearly*

*Name \_\_\_\_\_  
City \_\_\_\_\_  
School \_\_\_\_\_ Grade (Fall 2018) \_\_\_\_\_  
Parents \_\_\_\_\_  
#Parent Cell \_\_\_\_\_  
#Parent Email \_\_\_\_\_  
#If not on my mailing list*

*MS Camp ~ Select Session*

*S1: 11:00-1:30 \_\_\_\_  
S2: 2:00-4:30 \_\_\_\_*

*T-Shirt*

*Adult Size \_\_\_\_ Youth Size \_\_\_\_*

*Please Read and Sign*

*I authorize the staff of this camp to act for me according to their best judgment in any emergency requiring medical attention. I release the staff of the camp of any liability.. I know of no mental or physical problems that might affect my child's ability to safely participate. I will be responsible for any medical or other charges in connection with her attending the camp. I have read, understand and agree with these condition.*

---