

# Rick McLaughlin Volleyball Camp Registration

## **Boys Camp: July 27-30, 2020**

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Parent's Email

\_\_\_\_\_  
Home Phone ( )

\_\_\_\_\_  
Mother's Day Phone ( )

\_\_\_\_\_  
Father's Day Phone ( )

\_\_\_\_\_  
Team/Group Name Roommate Request

\_\_\_\_\_  
Please note any special concerns

**Checks are preferred but credit cards are fine.**

### **Choose One:**

☐ Day Camp (\$595)

☐ Individual Overnight (\$685)

☐ Group Overnight (\$635)  
For 6 or more campers.  
Applications must be sent in  
together.

**Make checks payable to:**  
**Rick McLaughlin Volleyball Camp**

**Camper's age at camp:** \_\_\_\_\_

**Camper's date of birth:** \_\_\_\_\_

**How did you hear about us?**  
\_\_\_\_\_

**Please circle t-shirt size:**

**Men's Sizes: S M L XL XXL XXXL**

### **Credit Card Payment Form: Visa or MasterCard**

Cardholder Information (Please Print Clearly)

Name (as it appears on card) \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credit Card # (Visa or MasterCard only) \_\_\_\_\_

Expiration Date \_\_\_\_\_ Credit Card (CCV) Security Code \_\_\_\_\_  
The 3 digit code that appears on the back of your card

\_\_\_\_\_  
Cardholder's Signature

Attach application or specify where this payment is to be credited (ie Child's Name, Camp Name)

\_\_\_\_\_  
You can use one credit card form  
for payment on multiple campers.

Total to be charged \$ \_\_\_\_\_