

2010
NORTH PLATTE COMMUNITY COLLEGE
VOLLEYBALL TEAM CAMP

TEAM NAME: _____

COACH OR SPONSOR: _____

SUMMER HOME PHONE: _____

CELL PHONE: _____

SUMMER E-MAIL ADDRESS: _____

Coach's T-Shirt size S M L XL XXL (please circle)

DIVISION: 1 2 3
(Division 1 - Highest, Varsity; 3 - Lowest, Freshman/Sophomore)

TEAM ROSTER

NAME:	PRINT	<u>T-SHIRT SIZE</u>			
		Adult Sizes			
1.	_____	S	M	L	XL
2.	_____	S	M	L	XL
3.	_____	S	M	L	XL
4.	_____	S	M	L	XL
5.	_____	S	M	L	XL
6.	_____	S	M	L	XL
7.	_____	S	M	L	XL
8.	_____	S	M	L	XL
9.	_____	S	M	L	XL
10.	_____	S	M	L	XL

Cost for the camp is **\$38.00 per camper**. Please fill out this roster and mail it along with **one check for your entire team**.

Check should be made to: **NPCC - Team Volleyball Camp.**

PLEASE RETURN ONE COPY AS SOON AS POSSIBLE AND RETAIN ONE COPY FOR YOUR RECORDS.