

**Mary Tendler-Camp Director  
Elon Head Coach**

Coach Mary Tendler is in her eighth year as the Head Coach at Elon and her 18th overall coaching at the Division I level. As an assistant, she helped guide two teams to both the NCAA Tournament and Conference Titles. Elon captured its most wins since becoming a Division I program last season with a 23-8 record, slightly surpassing the 19 wins established in 2008. The future looks bright for the Phoenix as they will return twelve of fifteen players in 2010. In addition to her college coaching experience, Tendler was a three time All-American at the University of Illinois and helped her team capture three Big Ten Championships and two Final Four appearances. After her college career was over, she spent a year and a half representing her country with the USA National Team. The final stage of her playing career was spent playing professionally in France and Germany.



**Hal Clifton-Assistant Camp Director  
Elon Assistant Coach**

Hal Clifton begins his sixth year serving on Tendler's staff as an assistant coach. Clifton came to Elon from St. Andrews Presbyterian College where he helped lead the team to a NCAA Division II Tournament bid. Prior to

Coach Clifton's stint at St. Andrews, he was the head coach at Jack Britt High School for three seasons, where he compiled an impressive 62-20 record. He has also coached Carolina High Performance and club volleyball for numerous years.

Coach Tendler and the camp staff will provide daily individual instruction. Past staffs have included Elon players, college players, as well as high school, club and college coaches.



Elon Volleyball Camp  
C/O Mary Tendler  
2500 Campus Box  
Elon, NC 27244



# ELON VOLLEYBALL CAMP

**July 9-12 & July 14-17**



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1  
0

AGES 12-18 WELCOME

VOLLEYBALL\* & T-SHIRT

DISCOUNTS FOR TEAMS

10 SESSIONS

## CAMP INFORMATION

- Low camper to staff ratio
- \*Volleyball given to the first 100 registrants of each session
- Thorough instruction on all fundamental skills
- 4 days of instruction, competitions, and tournament play
- Camp awards given out on final day
- T-shirt and certificates for all participants
- Teams are welcome and will receive a \$20 per player discount if 8 or more in group, 1 Coach FREE, \$150 per additional coach
- Check-in from noon-1:30 pm on Day 1



## COSTS

Resident .....\$330  
 Commuter w/ Lunch & Dinner .....\$285

Resident fee includes a room in the Elon University dorms and all meals. Meals will begin with dinner on Day 1 and continue through lunch on Day 4. **A non-refundable \$100 deposit is due with your application.**

## MEDICAL CARE

A certified athletic trainer will be on-site and available for any emergencies throughout the week. Alamance Regional Medical Center is minutes away if needed. Personal insurance must be provided and arranged for each camper by the camper's parent or guardian.

## LODGING/FACILITIES

Elon University dormitories will house all resident campers and coaches. Campers will be supervised at all times. Please indicate a roommate preference on the application. All dorms are air conditioned. The gym sessions will be at Alumni and Jordan Gym in the Koury athletic facility and East Gym.

## ELON VOLLEYBALL CAMP APPLICATION CAMP SESSION (CHECK CHOICE) SESSION 1: JULY 9-12 \_\_\_\_\_ SESSION 2: JULY 14-17 \_\_\_\_\_

Email: \_\_\_\_\_  
 (where confirmation will be sent)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Grade (Fall 2010): \_\_\_\_\_

School: \_\_\_\_\_ Position: \_\_\_\_\_

Coach: \_\_\_\_\_ Height: \_\_\_\_\_

Club Team: \_\_\_\_\_

Adult T-Shirt Size: S M L XL

Commuter (\$285) \_\_\_\_\_

Resident (\$330) \_\_\_\_\_

Subtract \$20 if with team of 8 or more!

Roommate Request: \_\_\_\_\_

## EMERGENCY CONTACT

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Phone: \_\_\_\_\_

## DON'T FORGET RELEASE & DEPOSIT!

Questions? Please contact:

Mary Tendler  
 (336) 278-6743

mtendler@elon.edu

or Hal Clifton  
 (336) 278-6843

hclifton@elon.edu

## Release for Medical Treatment

Application will not be complete until this signed form is returned. Since most of the students attending the camp are under 18 years of age, it is necessary that our doctors have the parent's permission to administer treatment in the event of accident or sudden illness. If you are 18 years of age or older, sign your name.

Name \_\_\_\_\_ Date \_\_\_\_\_

Any allergies to medicines? If so, list \_\_\_\_\_

List any conditions that physicians should be aware of \_\_\_\_\_

Phone # for emergencies: Day \_\_\_\_\_  
 Night \_\_\_\_\_

I hereby authorize any medical treatment which may be advised or recommended by the attending physician of (camper's name) \_\_\_\_\_ while at Elon University, Elon, NC

INSURANCE COVERAGE for accidental injury is required by all participants. If at the time of injury, no family insurance exists, limited secondary coverage is provided subject to policy terms, conditions, limitations and exclusions.

Please indicate your current insurance data below:

Insurance Company Name: \_\_\_\_\_

Policy Holder: \_\_\_\_\_

Policy Number: \_\_\_\_\_

### Release and Waiver of Liability (Please read carefully before signing)

The undersigned hereby acknowledges that participation in this camp and related activities involves an inherent risk of physical injury, and the undersigned, on behalf of the registrant, hereby assumes all such risk and does hereby release and forever discharge the camp and all employees and agents thereof from any and all liability of whatever kind or nature, arising from and by reason of any kind and all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property, and the consequences thereof, resulting from the registrant participation in or involvement with this camp, including any failure of equipment or defect in the premises.

I hereby state that I am the legal guardian of said child.

**A NON-REFUNDABLE deposit of \$100 must accompany each application. In order to qualify for the \$20 per player team discount, all team applications and deposits must be received together. Please make checks payable to:**

**Elon Volleyball Camp**  
 2500 Campus Box  
 Elon, NC 27244

DATE: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_