

FUTURE SPARTANS VOLLEYBALL CAMP

Hosted by: Jenny Adcock, Head Coach, Stratford High School

Date: July 29 - 31, 2020

Time: 1:00-3:00 pm (5th-7th grade); 4:00-6:00 (8th/9th grade)

Location: Stratford High School Main Gym

Instructors: Stratford HS and SBISD Coaching staff

Instruction: 6 basics skills of volleyball plus time training position-specific movement, team aspects, and competitive strategy

Open to: Incoming 5th-9th graders zoned to Stratford
Current SHS students are not eligible to attend camp.

Cost: \$40.00 per camper [CASH OR MONEY ORDER]
Scholarships available for students on free or reduced lunch.

Camp Provides: Equipment for drills & instruction, accident insurance, camp t-shirt

What to Wear: Shorts/spandex, t-shirt, athletic shoes (no Converse, etc.), knee pads, hair pulled up!

What to Bring: Water/Gatorade (also sold on breaks)

Registration Due Date: June 1st

If space is available, Late Registration is accepted & assessed late fee of \$5.

A confirmation email will be sent upon receipt of application.

For more information, please feel free to contact Coach Adcock at jennifer.adcock@springbranchisd.com.

NOTE: This camp is not a requirement to play volleyball for Stratford High School or any feeder school.

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2020 FUTURE SPARTANS VOLLEYBALL CAMP REGISTRATION FORM

CAMPER'S NAME: _____

T-SHIRT SIZE (ADULT SIZES ONLY): S M L XL

2020-2021 GRADE: 5 6 7 8 9

MIDDLE SCHOOL ATTENDING/ATTENDED: _____

HIGH SCHOOL YOUR DAUGHTER WILL ATTEND: _____

PARENT NAME: _____

PARENT EMAIL: _____

PARENT CELL: _____

HOME PHONE: _____

ADDRESS: _____

I hereby authorize the directors of the Future Spartan Volleyball Camp to act for me in accordance with their judgment in any emergency requiring medical attention. I further waive and release Future Spartan Volleyball Camp and its employees from liability for any damages from injuries and/or illness sustained at the Future Spartan Volleyball Camp. I know of no mental or physical condition which might affect my child's ability to safely participate in the camp. I have included a copy of my child's latest physical and have notified the camp instructors of any physical ailments my child has experienced of which they should be aware.

Parent/Guardian Signature _____

Date _____

COVID-19 Concerns?
Camp will occur contingent upon an "all clear" to return to campus. Please use this QR code to "pre-register" for camp
- no payment necessary.

