

THUNDER VOLLEYBALL CLUB

SCHOOL REGISTRATION FORM FOR VOLLEYBALL CAMP

SUMMER 2010



www.ttv.net

phone: 281.359-TTVC(8882) or email: clubdirector@ttvc.net



TEAM AND INDIVIDUAL VOLLEYBALL SESSIONS
 ALL SESSIONS AT SPECIFIED SCHOOL GYMNASIUM
 MINIMUM 10 PARTICIPANTS @ \$100 EACH
 SCHOOLS TO REGISTER BY MAIL AT ADDRESS BELOW, EMAIL OR PHONE IN FOR SPECIFIC TIMES
 CLINICS WILL FOCUS ON FUNDAMENTAL & COMPETITIVE LEVEL VOLLEYBALL SKILLS.
 INDIVIDUAL ATHLETES TO REGISTER WITH SCHOOL COACH
 10:1 COACH : ATHLETE RATIO GUARANTEED

Coach's Name: _____

School Address _____ City / State _____ Zip _____

Phone Contact #'s (1) _____ (2) _____

Email Address _____ No. Years Coaching Experience: _____

Team Coaching: _____ Age Groups: _____

High School _____ Middle School _____ Club Program _____

Circle All Players Attending: Setter Outside Hitter Right Side Hitter Middle Blocker Def. Specialist / Libero

Yes, I would like to be considered for a COACHING position for a Texas Thunder Volleyball Club 2010-2011 team!

Please indicate which School Camp Session you would like to reserve. Number your choices 1, 2 & 3.

School Camp Sessions (Monday- Thursday)		School Camp Sessions Friday & Saturday 8:30am-12:30pm; 1:00-5:00pm (both days)	
<input type="checkbox"/> Elementary/Middle School		<input type="checkbox"/> June 11 & 12	
<input type="checkbox"/> Varsity & Sub-Varsity		<input type="checkbox"/> June 18 & 19	
<input type="checkbox"/> June 7-10; 8:30-12:30pm	<input type="checkbox"/> June 7-10; 2-6:00pm	<input type="checkbox"/> June 25 & 26	
<input type="checkbox"/> June 14-17; 8:30am-12:30pm	<input type="checkbox"/> June 14-17; Rally Pt HS	<input checked="" type="checkbox"/> July 4th weekend	
<input type="checkbox"/> June 21-24; 8:30-12:30pm	<input type="checkbox"/> June 21-24; 2-6:00pm	<input type="checkbox"/> July 9 & 10	
<input type="checkbox"/> June 28-July 1; 8:30-12:30pm	<input type="checkbox"/> June 28-July 1; Rally Pt PV	<input type="checkbox"/> July 15 & 16 Rally Pt Positional Clinics	
<input type="checkbox"/> July 5-8; 8:30-12:30pm	<input type="checkbox"/> July 5-8 2-6:00pm	<input type="checkbox"/> July 23 & 24	
<input type="checkbox"/> July 12-15; 8:30-12:30pm	<input type="checkbox"/> July 12-15; 2-6:00pm	<input type="checkbox"/> July 30 & 31	
<input type="checkbox"/> July 19-22; 8:30-12:30pm	<input type="checkbox"/> July 19-22; 2-6:00pm	<input type="checkbox"/> August 6 & 7	
<input type="checkbox"/> July 26-29; Sam Houston HS	<input type="checkbox"/> July 26-29; Winnie	<input type="checkbox"/> August 13 & 14	
<input type="checkbox"/> August 2-5; 8:30-12:30pm	<input type="checkbox"/> August 2-5; 2-6:00pm	<input type="checkbox"/> August 20 & 21	
<input type="checkbox"/> August 9-12; 8:30-12:30pm	<input type="checkbox"/> August 9-12 2-6:00pm		
<input type="checkbox"/> August 16-19; 8:30-12:30pm	<input type="checkbox"/> August 16-19; Rally Pt MS		

Please indicate which skills you are requesting for your camp:

<p>Fundamentals:</p> <input type="checkbox"/> Passing <input type="checkbox"/> Setting <input type="checkbox"/> Hitting <input type="checkbox"/> Serving	<p>Advanced Skills:</p> <input type="checkbox"/> Defense <input type="checkbox"/> Offense <input type="checkbox"/> Transition <input type="checkbox"/> Blocking	<p>Systems:</p> <input type="checkbox"/> Rotational or Perimeter Defense <input type="checkbox"/> Quick Attack <input type="checkbox"/> Multi-Tempo Offense <input type="checkbox"/> Positional Serving
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These listed options are suggestions for you to customize your camp. Please feel free to request / suggest others:

I, _____ (please print) agree, as the responsible contact and / or coach for _____ School, that Texas Thunder Volleyball Club and its coaches will receive payment in full for the athletes involved in our customized volleyball camp for the specified date, time and place at a cost of \$100 per athlete prior to the start date of said camp. Individual athletes may make checks out to Texas Thunder Volleyball Club or TTVC which can be collected by the coach and given to a TTVC representative. (An additional fee may be added per participant for your facility rental fee)

Signed: _____ Date _____

Please return completed registration form and mail or email to reserve a date for your camp.
 Texas Thunder Volleyball Club -- 3615 Mulberry Hills Dr. -- Kingwood, TX 77339
 281-359-TTVC(8882) or @ Club Director's cell # 281-639-0239

For TTVC Office Use Only:	Payment Amount	Rec'd Date	Check #	Money Order #	Cash Received
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