

GIRLS VOLLEYBALL

June 20 - 23
 Monday - Thursday

GOAL

The goal of the Lynchburg City Schools Girls' & Boys' Volleyball Camp is to help students improve their volleyball skills while experiencing all the other valuable and positive benefits of a camp environment. Please join us for a terrific experience.

HIGHLIGHTS

- ◆ Outstanding camp staff
- ◆ Individual instruction
- ◆ Camp T-shirt
- ◆ Camp prizes

LOCATION

E. C. Glass High School
 Gymnasium



OBJECTIVES

- ◆ Develop fundamental offensive & defensive skills
- ◆ Learn the game of volleyball
- ◆ Increase self-confidence
- ◆ Develop a Positive attitude
- ◆ Demonstrate Sportsmanship

GRADES - TIMES

Rising 5th - 7th grade
 9:00 a.m. to 12:00 noon
 Beginner to age-appropriate intermediate level

Rising 8th - 10th grade
 12:30 p.m. - 3:30 p.m.
 Beginner to age-appropriate intermediate level

CAMP DIRECTORS

Kelly Bryant (Heritage High)
 Willie Wilson (E. C. Glass)

CAMP STAFF

Area High School and College
 Coaches and Players

REGISTRATION

Please send check or money order in the amount of **\$50.00 payable to Heritage High School/Volleyball Camp** with the completed registration form to

Kelly Bryant
 c/o Athletic Dept.
 Volleyball Camp
 Heritage High School
 3020 Wards Ferry Road
 Lynchburg, VA 24502

For more information contact Kelly Bryant, Heritage High School (434) 515-5411
bryantkm@lcsedu.net

Girls' Volleyball Summer Camp Application

Name _____ School Presently Attending _____ Grade _____
(As of fall 2016)

Home Address _____ City _____ Zip _____

Home Phone # _____ Emergency Daytime Phone # _____

Adult T-shirt Size: _____ Small _____ Medium _____ Large _____ Extra Large

Youth T-shirt Size: _____ Small _____ Medium _____ Large

Waiver: I, the parent or guardian of the above named student, hereby give my approval for his/her participation in the 2016 Lynchburg City Schools' Volleyball Camp. I assume all risks and hazards incidental to such participation. I do hereby waive, release, and agree to hold harmless the directors, counselors, supervisors, and the Lynchburg City Schools from any claim arising from an injury to my child while participating in the camp.

Parent/Guardian signature _____ Date _____

Send this completed form along with \$50.00 registration fee payable to Heritage High school/Volleyball Camp, to Kelly Bryant, c/o Athletic Department, Heritage High School, 3020 Wards Ferry Rd., Lynchburg, VA 24502, by June 3, 2016.