

2024 Patriots 8th Volleyball Camp

July 30th – August 1st

Goose Creek Memorial High School volleyball coaching staff will host a volleyball camp for **incoming 8th graders** at **GCM High School**. The camp will be a rigorous, high-intensity camp for incoming 8th graders. This camp aims to prepare players for the upcoming 2024 volleyball season, allowing them to play with the teammates they will have for the duration of the season. It consists of fundamental fine-tuning, offensive/defensive systems, serving strategies, advanced hitting and blocking, teamwork/mental toughness drills, and lots of fun and competition.

Camp Registration: \$40.00 (includes t-shirt)

Registration forms must be submitted by **July 5th** to receive a camp shirt.

T-Shirt Size (circle) Adult: S M L XL XXL

<u>Incoming Grade</u>	<u>Time</u>	<u>Location</u>
8 th	8:00 am – 10:00 am	GCM High School Competition Gym

Please make all checks payable to GCM Volleyball.
All checks must have a valid Texas Driver's License and phone number.

Please fill out the form below and mail it along with your payment to:

Goose Creek Memorial High School c/o Alicia Nava
6001 E Wallisville Rd
Baytown, TX 77521

If you have any questions, please feel free to contact **Head Volleyball Coach- Alicia Nava** at alicia.nava@gccisd.net

If you would like to fill out the registration form online instead of mailing this form in, here is the link:

<https://forms.gle/1FnVzPJbFfMCMfvj9>

Submitting the online registration form without payment will only secure a camper's spot. You can pay on the first day of camp.

Participant Name: _____ Birthdate: ____ / ____ / ____

Address: _____ Phone: _____

City/State/Zip: _____ Email: _____

Emergency contact: _____ Phone: _____

Release of Liability and Waiver:

I permit my child to enroll in the GCM Patriot Volleyball Camp and that they are physically fit to participate. I will not hold Goose Creek CISD, Goose Creek Memorial High School, or the appointed staff responsible in case of accident/injury or loss because of participation in these activities. I also agree to follow all instructions and procedures to maintain a maximum level of safety. I understand that the Goose Creek Memorial High School DOES Not carry accident/health insurance to cover participants or spectators in any program. I appreciate your cooperation.

Participant Name: _____ Parents Signature: _____ Date: _____