

# WESTERN PANTHERS VOLLEYBALL CAMP 2019

THE WESTERN VOLLEYBALL TEAM WILL BE OFFERING A PRIMARY SKILLS CAMP IN MAY. PLEASE READ THE FOLLOWING INFORMATION SO YOUR CHILD KNOWS WHEN SHE WILL NEED TO REGISTER AND WHAT TIME SHE WILL BE ATTENDING, AS WELL AS OUR FUN FACTS ABOUT CAMP.

## PRIMARY SKILLS CAMP

**WHO:** INCOMING 1ST & 2ND GRADE GIRLS FOR 2019-20 SCHOOL YEAR

**WHERE:** WESTERN INTERMEDIATE WEST GYM

**WHEN:** MAY 1, 2, 3

**TIME:** 3:30PM (AFTER SCHOOL) - 5:00PM

**COST:** \$30/CAMPER

**REGISTRATION DEADLINE**

**APRIL 25th, 2019**

## FUN FACTS ABOUT SKILLS CAMP

CAMPERS WILL WORK WITH HIGH SCHOOL COACHES AND PLAYERS

EVERY CAMPER WHO REGISTERS BY THE DEADLINE WILL RECEIVE A CAMP T-SHIRT

CAMP SHIRTS CAN BE SIGNED BY THE HIGH SCHOOL PLAYERS ON THE LAST DAY OF CAMP

CAMPERS WILL BE TAUGHT THE FUNDAMENTALS OF VOLLEYBALL AT THEIR LEVEL IN A FUN WAY WITH THEIR PEERS

EACH CAMPER WILL RECEIVE A HAND OUT OF DRILLS TO PRACTICE AT HOME

PRIMARY CAMPERS WILL REPORT TO THE WEST GYM AFTER SCHOOL AND WILL NEED A NOTE TO THEIR TEACHER

IF PARENTS WOULD LIKE TO SEND A SNACK WITH THEIR CAMPER THERE WILL BE A SHORT BREAK AFTER SCHOOL TO EAT AND CHANGE CLOTHES IF NEEDED

QUESTIONS? PLEASE CONTACT  
SACHA BURKETT  
HEAD VOLLEYBALL COACH  
(765) 717-4558  
SBURKETT@WESTERN.K12.IN.US

THE BASKETBALL & VOLLEYBALL PROGRAMS ARE WORKING CLOSELY TOGETHER TO PROMOTE MULTI-SPORT FEMALE ATHLETES. COACH STAGE & MYSELF HAVE DECIDED TO OFFER AN EXTRA T SHIRT FOR GIRLS WHO ATTEND BOTH BASKETBALL & VOLLEYBALL CAMPS.

**IF YOUR DAUGHTER SIGNS UP FOR BOTH CAMPS, THEY WILL RECEIVE AN ADDITIONAL T SHIRT PROMOTING FEMALE ATHLETES & BOTH SPORTS FREE OF CHARGE!**

PLEASE FILL OUT THE INFORMATION BELOW AND RETURN TO YOUR CHILD'S MAIN BUILDING OFFICE OR HIGH SCHOOL ATHLETIC OFFICE WITH CASH OR CHECK MADE OUT TO SACHA BURKETT BY THE DEADLINE LISTED ABOVE. BY FILLING OUT THE INFORMATION BELOW AND REGISTERING FOR THE WESTERN VOLLEYBALL YOUTH CAMP, YOU ARE GIVING PERMISSION FOR YOUR CHILD TO PARTICIPATE IN THE CAMP AND WILL NOT HOLD WESTERN SCHOOL CORPORATION OR ANYONE CONNECTED WITH THE CAMP RESPONSIBLE FOR MEDICAL, DENTAL, OR ANY OTHER EXPENSES INCURRED AS A RESULT OF ACCIDENT.

CAMPER NAME: \_\_\_\_\_ 2019-20GRADE LEVEL: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

PARENT EMAIL: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_ CHECK # (IF APPLICABLE): \_\_\_\_\_

SHIRT SIZE (CIRCLE ONE):      YS      YM      YL      YXL      AS      AM      AL      AXL