

# 2024 PEARLAND OILER VOLLEYBALL CAMP



Date: Monday, June 3 through Wednesday, June 5, 2024  
Ages: Camp is for 4 year old's through 9<sup>th</sup> graders. Both boys & girls are welcome!  
(Please note your child's age below for camp time)  
Time: 8:00 to 9:30 a.m. – **Camp I: 4 years old-3<sup>rd</sup> graders**  
9:45 to 11:45 a.m. - **Camp II: Incoming 4<sup>th</sup> - 7<sup>th</sup> graders**  
12:00 to 2:00 p.m. – **Camp III: Incoming 8<sup>th</sup>- 9<sup>th</sup> graders**  
Where: PHS Searcy Gymnasium  
Cost: \$95.00 – Now through April 31st;  
\$100 – May 1-May 24<sup>th</sup>  
\$115 – Late Registration- May 25<sup>th</sup> or after



**\*Zelle and Venmo information below. Cash only at the door.**

**Scan QR Code to Register Online**

This camp is an all skills camp that works on the camper's fundamentals, technique, and mental toughness. The goal is to develop a solid foundation so that the camper can become a better volleyball player. We strive to maintain a fun and competitive atmosphere, so the camper gets the most out of each touch of the volleyball.

Campers will receive instruction in serving, hitting, passing, blocking and defense. Campers will need knee pads, athletic shorts, and tennis shoes and water. (No other outside food will be allowed inside gym). For more information contact Coach Gill at [gillj@pearlandisd.org](mailto:gillj@pearlandisd.org) or call 281-701-3461

\*\*\* \*\*

## 2024 Pearland Oiler Volleyball Camp Registration Form PLEASE USE QR CODE ABOVE TO REGISTER

Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
Age/Grade \_\_\_\_\_ Shirt size (Circle one): Adult S M L XL XXL Youth S M L  
Parents name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Family Doctor: \_\_\_\_\_ Doctor Office Phone: \_\_\_\_\_  
Select a session: \_\_\_\_\_ **Camp I: 4 years old-3<sup>rd</sup> graders** \_\_\_\_\_ **Camp II: Incoming 4<sup>th</sup>-7<sup>th</sup> graders**  
\_\_\_\_\_ **Camp III: Incoming 8<sup>th</sup> - 9<sup>th</sup> graders**

**Payment Method:** \_\_\_\_\_ **Zelle** (Jamie Gill: 281-701-3461) \_\_\_\_\_ **Venmo** - @coachgilltx

**\*\*\*\* Please make sure Camper's full name is in the memo of payment\*\*\*\***

I, as a parent or guardian, hereby give permission for my child to participate in the Pearland Volleyball camp and acknowledge the fact that he/she is physically able to participate in camp activities. I hereby authorize the camp staff to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I may be responsible for any cost (through family medical insurance or otherwise) incurred due to sickness or injury to my son/daughter. I hereby waive any claim I might have against the camp, director, or the institutions providing the facilities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

This athletic camp follows the guidelines set forth by Pearland ISD and the UIL