Clear Falls Volleyball Camp 2025

Camp Dates: July 28th – July 30th

Session I - Incoming K-5th graders
8:00 am – 10:00 am

Session II - Incoming 9th graders
8:00 am – 11:00 am

Session III - Incoming 6th-8th graders
10:30 am – 1:00 pm
(athletes will be grouped by ability, not necessarily age)

BOYS & GIRLS WELCOMED TO ALL LEVELS OF CAMP

Location: All Camps will be at Clear Falls High School

Registration Costs
PAYMENT WILL BE COLLECTED ON 1ST DAY

K-5th grade	$80
6th-8th grade	$90
9th grade	$100

Online Registration Form

Cash or Checks accepted at the door!!!
Make Checks Payable to: Alison Williams
CCISD Employees receive 50% discount

Email Registration Form To:

Coach Williams: Awilliams@ccisd.net
PAYMENT WILL BE COLLECTED ON 1st Day of CAMP

REGISTER BY JULY 14th TO GUARANTEE SHIRT SIZE

For additional information, contact:
Coach Williams – awilliams@ccisd.net

Camp Description

These camps are designed to not only give each athlete an opportunity to refresh their volleyball skills, learn new skills and strategies, but to also see their future teammates. We will go over the fundamentals of volleyball and introduce offensive, defensive, serve receive systems and have athletes participate in game play. Each camper will receive a t-shirt at the end of camp. **Boys and Girls are welcome to attend!**

What To Bring To Camp

Court shoes, Knee pads, Workout clothes, Water, Great Attitude & Willingness to Learn

Camper Name: _____ Age:_____

Parent/Guardian Name: _____

Address: _____

Contact #: _____ Alternate #: _____

Parent/Guardian Email: _____

Grade Entering 2025: _____ School attending in 25-26:_____

Years volleyball experience: _____ Club Team: _____

Session Attending: I   II   III

Camp T-Shirt Size: YS   YM   YL   AS   AM   AL   AXL

I hereby authorize the coaching staff to act for me according to their best judgment in any emergency requiring medical attention, and hereby waive and release the camp from liability for any injuries or illnesses incurred while at the camp. Each camper will be covered by a group insurance policy.

_____
Parent/Guardian Signature

_____
Date