Camp Staff:

Nicole Stegall – She will be entering into her 11th year of coaching High School; fourth year Varsity at Xavier. She has coached 9 years with Xavier and 1 year with Ashwaubenon High School. She also has been coaching 12 year of club volleyball with FC Elite.

Additional staff will be made of current Varsity and JV Volleyball players.

Camp Goals:

The Xavier Hawks Volleyball Camp provides an excellent opportunity for girls entering grades 3rd -9th to increase their knowledge of volleyball, to further develop the skills necessary to become a successful player and most importantly to have fun.



Xavier High School Volleyball Camp 2015

Xavier High School



Girls Volleyball Camp 2015

June 8th – June 11th Grades 3-9

Xavier High School

Girls Volleyball

Camp

Who: Open to girls entering into 3rd – 9th grade in the fall of 2015

Date: June 8th – 11th

Time:	Grade:			
8:30 - 9:30	$3^{rd} - 4^{th}$			
9:30 - 11:00	$5^{th}-6^{th}$			
11:30 - 1:30	$7^{th} - 8^{th}$			
1:00 - 3:30	9 th			

Place: Torchy Gym (3-6) Blue Gym (7-9)

Fee: \$35 (3-6), \$50 (7-9)

Equipment Needed

- T-shirt
- Gym shorts/spandex
- Volleyball shoes
- Knee pads
- Water bottle

Typical Day

- Warm-up
- Instruction & Demo
- Drills
- Games/Contests
- Team Play

How to Enroll

Complete the enclosed registration form and return it with cash or check payable to:

Xavier Booster Club

Mail to:

Xavier High School Attn: Nicole Stegall 1600 West Prospect Ave Appleton, WI 54914

Any Questions

Please contact Nicole Stegall at 920-883-0029 or email to xaviervbhawks@gmail.com

Volleyball Camp Registration Form

Name:						
Address:						
Phone:						
School in 2015:						
Grade in 2015:						
T-shirt size: YS	ΥM	YL	AS	AM	AL	AXI
Email address:						

Health and Medical Information/Liability Waiver

I certify that this athlete is in good physical condition and is physically able to participate in volleyball camp activities. Also, I hereby authorize the directors of the camp to act for me according to their judgment in any emergency requiring medical attention.

Furthermore, I hereby waive and release Xavier High School, the Athletic Department, the Xavier Volleyball Program and the Xavier Volleyball Camp (its directors, coaches, and workers) for any and all liability for any injuries incurred while attending camp.

The name of our incurance company

Insurance Information

The name of our insurance company.	
The policy number:	•
Signed (Parent or Guardian):	•