



VOLLEYBALL IN PROGRESS

2019 SPRING CLINIC

What: Sign your child up for our 6-week spring volleyball clinic held right here in Coppell!! The first hour every night will focus on fundamental training and skill development, and the last hour will be dedicated to game situations, controlled scrimmages, and competitions. Our goal is to create a fun and challenging environment for your child to learn and improve his/her volleyball skills without a massive time commitment.

Directing this spring clinic will be head volleyball coach Julie Price. Coach Price led the Coppell Cowgirls to back-to-back 5A State Championships in 2011 and 2012. The Coppell Cowgirls finished the 2012 season as the #1 ranked high school volleyball team in the nation. Before coming to Coppell, Coach Price led the Lake Travis Cavaliers to the 4A State Championship in 2010. Assisting with the camp will be volleyball coaches from Coppell High School, Coppell Middle Schools, and Coppell Cowgirls from the previous seasons.

Who: 1st-6th graders, both girls and boys welcome!!

Dates: Session I - March 18, 25, April 1, 8, 15, and 22 (Mondays)
OR
Session II - March 20, 27, April 3, 10, 17, and 24 (Wednesdays)

Where: Coppell Middle School North (120 Natches Trace, Coppell)

Time: 6:00 PM - 8:00 PM

Cost and \$160.00 postmarked by Mar 15. (Add \$10 if postmarked after Mar 15)

Deadline: Every player will receive a T-shirt as part of the registration fee.



Mail registration and fee
with check payable to
Volleyball In Progress to:

Volleyball In Progress
PO Box 2674
Coppell, Texas 75019

For Online Registration/Payment:



Scan QR code or
go to the website
below:

www.volleyballinprogress.com

Coach Contact Info:

Julie Price
Head Volleyball Coach
Coppell High School
vbinprogress@gmail.com
817-913-5296

Shirt Size: (circle one)

Youth: S M L XL

Adult: S M L XL

Player's Name: _____

Session I: _____ Session II: _____ Sessions I and II: _____

Grade: _____ What school do you currently attend? _____

Parent's Name: _____

Parent's E-mail: _____

Parent Cell Number: _____

AGAIN THIS YEAR

Choose the night of the week that works best for you! Sign your child up for Session I (Mon nights) OR Session II (Wed nights). If you would like for your son/daughter to attend both sessions each week, there is a \$30 discount (so price is \$290 for both).

As a parent/guardian of _____ I release, waive, discharge Volleyball In Progress, its employees, staff, and administration from any and all liability claims resulting from loss, injuries, illness, and other damage including death which may be sustained by my child during the duration of the Volleyball In Progress Spring Clinic. To the best of my knowledge my child is in good physical condition and I am not aware of any physical infirmity which would place my child at risk while participating in the league. During the period of the clinic, I hereby give permission to the staff of VIP to administer proper medical assistance to my child in the event of accident, illness or injury. I understand that I will be responsible for any and all costs of the medical treatment and coverage provided not covered by insurance.

I HAVE READ THE WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS TERMS.

Parent Signature _____

Date _____