

Volley School Training Registration Form

Name _____ Grade _____
Years of Club Volleyball Experience _____
Parent's/Guardian's Names _____
Contact Tel (____) _____ 2nd Tel (____) _____
Email _____

**SERVE/PASSING/DEFENSE VOLLEY SCHOOL
FOR 8—10TH GRADERS**

The following must be signed by a parent or legal guardian for registration to be accepted.

Parental Release/Hold Harmless Agreement.

I/We, the parent/guardian of _____ hereby give my/our permission for her participation in any and all activities of the Volleyball Form & Technique Training Programs. I/We, our heirs, executors and administrators do hereby waive, release, absolve, indemnify and forever discharge Coach Ib, Coach Ib's Volleyball Form & Technique Training programs, Club North Volleyball, its directors, staff from all claims for damages, injuries, or loss to a person or property which may be sustained during participation in training activities or while at the training site whether or not damages, injury, or loss is due to negligence. I/We understand that participation in this training program will require physical activities of a nature which could result in injury to participants. I/We further acknowledge that she is physically able to participate in training activities and hereby authorize her participation in the training program. I/We agree to allow my child to be treated by a certified athletic trainer or physician (if necessary) and to assume all costs related to such treatment.

Signature of Parent/Guardian _____ Date _____
Insurance Co. _____
Policy _____

Any medical restrictions or limitations as certified by a physician should be noted below

ABOUT SKILLS TRAINERS

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Coach Ib—Director/Lead Skills Instructor for the Volleyball Skills Training Academy. Coach Ib spent 15 years as Head Coach at Pittsburg State University where he led the Gorillas to 6 NCAA Tournaments with several team members earning All-America honors. Participant's can expect to benefit from his training in the areas of efficient form and technique for ball control in all positions along with intelligent decision making during team play. **Coach Ib will directly lead this High Potential Training.**

**Serve/Pass/Defense Training for those going into
8-10th Grades in 2019/20 School Year**

- 16 Participants only—Small Group Focus
- Efficient Individual Form & Technique Training to improve Ball Control in Serve/Passing/Defense
- Aggressive & Tactical Serving
- Eye to Ball / Feet to Ball / Platform Focus
- Reading / Decision Making & Defensive Strategies
- Classroom Video Evaluation to provide Visual Feedback to accelerate participant's progression

TRAINING SCHEDULE

- Sat. May 11, 18, 25. 9—10:30am
- Wed. June 5. 5—6:30pm
- Mon. June 10. 5—6:30pm
- Sat. June 1, 8, 15. 9—10:30am

TRAINING FACILITY

Club North Gym, 5110 NW Waukomis Drive, Riverside, MO 64151

TRAINING FEES

\$190 total per participant for all 8 Training Sessions

- Mail completed form with \$45 deposit which will be deducted from total fees. Total fees will **be due by 1st day of training.**
- Payment should be made to: **Coach Ib Volleyball**
5913 NW Creekview Dr, Parkville, MO 64152
Please call 620.249.6380 or email vbtrainer@aol.com for more information.

No refunds due to facility and coaches commitments.



**SERVE/PASSING/DEFENSE
VOLLEYSCHOOL FOR
8—10TH GRADERS GOING
INTO 2019/20 SCHOOL YEAR**
**** Must Have 1 Year Minimum of
Club Volleyball Experience to Enroll ****

