

In case of emergency, please contact:

1. -----  
(Name Relationship)

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(Phone Number)

2. -----  
(Name Relationship)

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(Phone Number)

3. -----  
(Name Relationship)

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(Phone Number)

Drop off registration form with **cash** or **money order**  
(RE: Stratford Volleyball)  
at the SHS Front Office or mail to:

Stratford Volleyball  
c/o Jenny Adcock  
14555 Fern Drive  
Houston, TX 77079

**\*PLEASE, NO PERSONAL CHECKS\***

Scholarships are available:  
Contact Coach Adcock for more information at  
[jennifer.adcock@springbranchisd.com](mailto:jennifer.adcock@springbranchisd.com)

# STRATFORD HIGH SCHOOL



# FUTURE SPARTANS VOLLEYBALL CAMP 2017

JULY 24<sup>th</sup> – 27<sup>th</sup>  
For girls entering 6<sup>th</sup> – 9<sup>th</sup> grades

# FUTURE SPARTANS VOLLEYBALL CAMP

Hosted by: Jenny Adcock  
Head Coach, Stratford High School

Date: July 24 - 27, 2017

Time: 3:00 - 6:00 pm

Location: Stratford High School Main Gym

Instructors: Stratford HS and SBISD Coaching staff, former players, other qualified Houston area coaches

Instruction: 6 basics skills of volleyball plus time training position-specific movement, team aspects of volleyball, and competitive strategy

Open to: Incoming 6<sup>th</sup>-9<sup>th</sup> graders

*\*Current SHS students are not eligible to attend camp.\**

Cost: \$40.00 per camper

*\*Scholarships available for students on free or reduced lunch.\**

Camp Provides: Equipment for drills & instruction, accident insurance, camp t-shirt

What to Wear: Shorts/spandex, t-shirt, athletic shoes (no Converse, etc), knee pads, hair pulled up!

What to Bring: Water/Gatorade (will also be sold on breaks)

Registration Due Date: June 8<sup>th</sup>

*\*Late Registration accepted if space is available & assessed a late fee of \$5.\**

A confirmation email will be sent upon receipt of application.

For more information, please feel free to contact Coach Adcock at [jennifergrace13@gmail.com](mailto:jennifergrace13@gmail.com).

*\*NOTE: This camp is not a requirement to play volleyball for Stratford High School or any feeder school.\**

# 2017 FUTURE SPARTANS VOLLEYBALL CAMP REGISTRATION FORM

CAMPER'S NAME: \_\_\_\_\_

T-SHIRT SIZE (ADULT SIZES ONLY):    S    M    L    XL

2017-2018 GRADE:    6    7    8    9

MIDDLE SCHOOL ATTENDING/ATTENDED: \_\_\_\_\_

HIGH SCHOOL YOUR DAUGHTER WILL ATTEND: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

PARENT CELL: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARENT EMAIL: \_\_\_\_\_

I hereby authorize the directors of the Future Spartan Volleyball Camp to act for me in accordance with their judgment in any emergency requiring medical attention. I further waive and release Future Spartan Volleyball Camp and its employees from liability for any damages from injuries and/or illness sustained at the Future Spartan Volleyball Camp. I know of no mental or physical condition which might affect my child's ability to safely participate in the camp. I have included a **copy of my child's latest physical** and have notified the camp instructors of any physical ailments my child has experienced of which they should be aware.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

OVER →