

Camp Director

Head Coach, Monte Moser

The Centerville Volleyball Coaching staff presents the 13th annual Volleyball Camp held at Centerville High School. The girls' camps will be held July 21-24. Enrollment is based upon grades entering the 2008-2009 school year.

The purpose of the camp is to introduce, teach and improve on the skills of competitive volleyball. The players will be instructed in the areas of passing, serving, setting, hitting, defense and offense. Each player will be involved in a variety of "fun" drills that will reinforce the skills and techniques of volleyball.

Enrollment is limited so that a personal level of instruction can be maintained. If you are interested in improving your skills, having fun and challenging yourself, then this camp is for you.

Under the direction of Head Coach Monte Moser, the camp will be staffed by high school coaches, volleyball alumni and players from the Centerville High School Boys' and Girls' Volleyball programs. Included in the camper's registration fee are 4 days of personal instruction, tuition and a camp T-shirt. The fee must accompany the completed camp application.

Centerville Volleyball Camps

Dates: July 21-24, 2008

Days: Monday through Thursday

Time Schedule

Grades 8-10, 1:30-3:30pm

Grades 5-7, 3:30-5:30pm

Cost:

\$60 for all camps

To Register:

Complete the registration and liability form and send with payment to

CENTERVILLE VOLLEYBALL CAMP
c/o MONTE MOSER
3037 LARUE DRIVE
KETTERING, OH 45429

Registration is requested by July 12, 2008 so that proper planning and staffing may be completed prior to the camp week.

On-site registrations will be accepted the first day of camp at check-in, 30 minutes prior to the start of camp.

For **additional information** contact:

Monte Moser ohiovbgyu@hotmail.com

Registration Form: Please print one form per child.

Name: _____ Age: _____ Grade (2007-2008): _____

Address: _____ City: _____ Zip: _____

Phone #: _____ Gender: M / F T-Shirt size (Adult Size): S M L XL

Parent/Guardian's Name: _____ Cell/ Work # _____

Emergency Contact: _____ Phone: _____

Is there any reason your child's physical activity should be restricted? _____
Does your child have any medical/ allergy conditions that the Camp Staff should be aware of? _____

Send Registration to: CHS Volleyball Camp, c/o Monte Moser, 3037 Larue Drive, Kettering, Ohio 45429

Centerville Summer Volleyball Camps for Girls



**July 21-24
2008**

Girls Summer Open Gym Dates

To be announced on www.elksvolleyball.com

Girls Summer Conditioning/Weight Lifting Dates

Every Tues & Thurs April 22-May 29 (5-7pm)
Every Tues & Thurs June 17- July 24 (5-7pm)

Girls Try-out Dates

August 4-7, Grades 9-12 (5-8pm)
August 4-7, Grades 7-8, TBA

Sand Volleyball

Every Wednesday June 18 – July 23 (1-4pm) at
Yankee Park in Centerville

2008-2009 Girls Volleyball Schedule

8/23 @Mt. Notre Dame w/ C-J 10/11:15/1
JV @ C-J; 9th @ CHS
8/26 Vandalia-Butler 4:30/5:30/6:30
8/28 Springboro 4:30/5:30/6:30
9/2 Beavercreek 4:30/5:30/6:30
9/4 @ Miamisburg 4:30/5:30/6:30
9/6 @ Alter 10/11/12
9/9 @ Troy 4:30/5:30/6:30
9/11 Northmont 4:30/5:30/6:30
9/13 @ Lebanon 10/11/12
9/15 Mother of Mercy (9th) 5:00
9/16 @ Springfield 4:30/5:30/6:30
9/18 Fairmont 4:30/5:30/6:30
9/22 Lakota West 5:45/7:00
9/23 Wayne 4:30/5:30/6:30
9/27 @ Mother of Mercy 11/12/1
9/30 GWOC Tournament TBA
10/2 GWOC Tournament TBA
10/4 Lakota East/Seton 9/11
JV @ Lakota East; 9th @ Seton
10/7 GWOC Tournament TBA
10/9 GWOC Tournament TBA

Liability Release: (A camper cannot participate unless this form has been completed on both sides and signed)

I, the undersigned, being the parent and/or guardian of _____ understand the risks involved in participating in volleyball and hereby consent for my child to participate in the activities or use of facilities of Centerville City School. I hereby release, indemnify, and hold harmless the Centerville City Schools, its School Board, agents, employees and assignees from any and all liability, claims, actions, demands and judgments arising out of any injury or loss sustained by the above named child or myself in connection with Centerville Volleyball Camp activities or Centerville City School Facilities.

Parent or Legal Guardian _____ Date _____

Address _____ City _____ Zip _____