

 ***Atomic! Volleyball 5/6 Academy***

 **5th & 6th GRADE GIRLS**

 **6 Sundays from Sept 15th – Oct 20th, 2019**

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**Location of Program: Brownstown Sports Center**

**Address: 21902 Telegraph Rd, Brownstown, MI 48183**

**Program Details:** The purpose of the academy is to teach ALL skills of the game in a fun and competitive atmosphere. We want to give 5th and 6th graders the opportunity to practice skills AND play 4 vs 4 in a game like environment.

**Please bring:** Court shoes, knee pads (if possible) and workout clothes, water bottle, good attitude.

**Cost**: $120 includes a t-shirt (payable to Atomic! VBC)

**Coaches:**

**Coach Dennis Yack**, Atomic! Volleyball Director **Coach Josh Short**, Atomic! Assistant Director

* 10u Head coach at Atomic \* 18u Head coach at Atomic
* 24 years coaching experience at HS/MS/AAU \* 20 years coaching experience at HS/MS/AAU
* 10 years Middle School Math teacher \* 2nd grade teacher

**Coach Jeff Klug**, Atomic! Volleyball Coach

* 10u coach at Atomic
* 2 years coaching experience at AAU

**Time**: 3:30PM - 5:00PM

**NOTE: We are limiting this to ONLY 20 athletes. We only want 10 athletes per court, which will increase the amount athletes will experience live game like action**.

***Mail Registration form and check to: Atomic! VBC, P.O. Box 1381, Southgate, MI 48195***

**Questions: atomicvbc@gmail.com or call/text Coach Yack at 734-934-4064**

**Like us on facebook**

----------------------------------------------------------------------------------------(keep to portion for your records)------------

**Registration Form 🡪 Atomic! 5/6 Academy (September 15 – October 20)**

Athlete’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Shirt Size (youth) \_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (print clear) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade Level (Fall of 2019) \_\_\_\_\_\_School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize the staff of the Atomic! VBC to act on my behalf according to their best judgment in any emergency requiring medical attention if I cannot be reached. I, further, waive and release the Atomic! VBC and its staff from any and all liability for the injuries or illnesses incurred while involved in this camp. I have no knowledge of any physical impairment that would keep the above named athlete from full participation in this camp.

Parent or guardian signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Name (Printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_