

2012 TEXAS VOLLEYBALL TEAM CAMP REGISTRATION FORM

2012 TEXAS VOLLEYBALL TEAM CAMP REGISTRATION GUIDELINES

To register for camp, you must:

- Team Representative – Please complete page 1 of this registration form and submit.
- Please have each team member fill out page 2 of this registration form and submit. **A \$75 deposit per team member** is required. (Applicable to camp fee)

Team Representative:

Please submit page 1 to hold a spot for your team. Each team member can submit page 2 at the same time or a later time. All team member forms and payment should be submitted by June 25th, 2012.

REGISTER ONLINE! VISIT WWW.TEXASVOLLEYBALL.COM TO SIGN UP TODAY!

1. Team Camp Session Type:

Team will provide coach Coach's Name: _____

Dorm Team (\$300/person) Commuter Team (\$250/person) **Coaching Guidelines**

Team will need a coach

Dorm Team (\$325/person) Commuter Team (\$275/person)

- Teams can provide their own coach or have Texas Volleyball Camp provide a coach for them
- It is recommended that each team provide a team representative/chaperone that is different from the team coach

2. Team Information

School Name: _____ Classification: 1A 2A 3A 4A 5A Other _____

School/Team Mascot: _____ Level: Freshman JV Varsity Other _____

3. Team Representative (All correspondence will be directed to the Team Representative. Team Representative will stay in the dorm if dorm team)

Name: _____ Daytime Phone: _____ Cell Phone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Email: _____

4. Payment of Expense Camp Statement

NCAA guidelines prohibit payment of camp expenses (e.g., transportation, camp fees, spending money, etc.) by a representative of The University of Texas' athletics interests. NCAA rules also prohibit free or reduced camp admission for prospects (9th grade and above). By signing below, I affirm that I have read and understand the NCAA legislation as it pertains to the payment of camp expenses for the camper listed on this form. I understand that any violation of the NCAA rules may jeopardize the NCAA eligibility of my son or daughter.

Signature of Team Representative

Date

5. Payment

Check* Cashier's Check* Money Order* *make payable to The University of Texas Amount Enclosed \$ _____

Credit Card Payment Charge my: MC Visa AMEX DC Amount to Charge \$ _____

Exp. Date
Month Year

Name on Card: _____ Signature: _____

IF PAYING BY CREDIT CARD, PLEASE REGISTER ONLINE AT WWW.TEXASVOLLEYBALL.COM

RETURN REGISTRATION FORM AND ALL PAYMENTS TO OUR BANK: Texas Volleyball Camp • P.O. Box 47939 • San Antonio, TX 78265-8939
(Please note that our camp is held in Austin, Texas)

QUESTIONS? Email < texasvolleyballcamp@athletics.utexas.edu > Website < www.texasvolleyball.com > Phone < 512.471.0804 > Fax < 512.471.9069 >

For Office Use Only: Date Received _/ _/ _ LB # _____ Payment Type _____ Payment Amount _____ Date Processed _/ _/ _

