

## Coastal Carolina Volleyball Academy Team Camp Registration Form 2014

When complete, please mail the form to Coastal Carolina Volleyball Academy, PO Box 261954, Conway, SC 29528. Please make your check payable to Coastal Carolina Volleyball Academy or CCVA.

### Team Information (1 separate form/each team)

High School or Club Name \_\_\_\_\_

Team Name: \_\_\_\_\_

School or Club Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Coach and Staff Information

Head Coach's Name: \_\_\_\_\_

Head Coach's Email: \_\_\_\_\_ Head Coach's Cell Phone: \_\_\_\_\_

Approximate Number of Players on Varsity Team \_\_\_\_\_ or on JV Team: \_\_\_\_\_

Approximate Number of Additional Coaches/Chaperones/Team: Varsity \_\_\_\_\_ or on JV Team: \_\_\_\_\_

Names of Additional Coaches/Chaperones \_\_\_\_\_

Team Camp Interested in Attending: Team Camp 1 (7/16-18/14) \_\_\_\_\_ Team Camp 2 (7/19-21/14) \_\_\_\_\_

Residential Team (Tuition: \$245.00/camper) \_\_\_\_\_ or Commuter Team (Tuition: \$205.00/camper) \_\_\_\_\_

### Camp and Payment Information

**Registration Deposit:** \$600.00/team (\$75.00/player for a team of 8) that counts toward the tuition. Your team's spot will not be held until we have received a \$600.00 deposit for each spot reserved. The remaining tuition is due no later than **30 days** before camp starts (mail-in and online registration) or another team from the waiting list will get your team's spot and the registration deposit will not be refunded. No exception.

**Refund Policy:** Cancellations due to injury, with medical documentation provided by a physician, will be refunded in full minus the online processing fee. Cancellations for any other reasons will be refunded all but the \$75.00 non-refundable deposit and the online processing fees. Once camp begins, refunds will ONLY be given in the event the camper is injured or ill and must depart from camp.

I register my team for the Coastal Carolina Volleyball Academy Team Camp 2014.

Enclosed Payment: \_\_\_\_\_ Enclosed Check Number: \_\_\_\_\_

Head Coach's Signature \_\_\_\_\_ Date \_\_\_\_\_