This **2020** Team Camp sign up form can **only be completed by the head coach of the high school**. By filling out this form, head coaches can reserve their spot(s) in Team Camp. Be sure to read all refund/cancellation policies listed on the website carefully.

*School Information*

1. **Name of School:** Click here to enter text.
2. **School Address:** Click here to enter text.
3. **School Address Line 2:** Click here to enter text.
4. **School City:** Click here to enter text.
5. **School State:** Click here to enter text.
6. **School Zip Code:** Click here to enter text.

*Coach Information*

1. **Head Coach First Name:** Click here to enter text.
2. **Head Coach Last Name:** Click here to enter text.
3. **Head Coach Phone:** Click here to enter text.
4. **Head Coach Email**: Click here to enter text.

*Team Camp Information*

1. **Which Team Camp dates are you interested in signing up for?** Choose an item.
2. **Which Team Camp package are you interested in?** Choose an item.
3. **How many teams are you bringing?** Choose an item.
4. **How would you classify the team(s) you are bringing?** Choose an item.
5. **Is this camp pre-tryout or post-tryout for your high school team?** Choose an item.
6. **If pre-tryout, is this camp being used as part of tryout evaluation for your school?** Choose an item.
7. **How many total coaches do you expect to bring (INCLUDING yourself)?** Choose an item.
8. **Approximately how many players do you expect to bring (if you are bringing multiple teams, please give a total number for all teams combined)?** Click here to enter text.
9. **Is there anything else you’d like us to know about your team’s participation?** Click here to enter text.

[ ] By checking this box, I acknowledge that I have read the refund/cancellation policy listed on the website. I understand that I have an obligation to participate in this team camp and if any of the registration requirements are not met by the specified dates (at least 8 players per team registered by June 5), my spot(s) in team camp will be forfeited and be assigned to the next team(s) on the waitlist.

**Head Coach Electronic Signature:** Click here to enter text.

Once complete, submit form to lfreeman@sports.uga.edu. You will be contacted by a Tom Black Volleyball Camps staff member following submission of this form. Please look over all the information you entered to ensure it is correct.