

# LAWRENCE UNIVERSITY



## GIRLS VOLLEYBALL POSITION TRAINING 2015



**MAY 6, 13, 20**  
**GRADES 9 - 12**

### **CAMP DIRECTOR**

Matt Schoultz is starting his 10<sup>th</sup> year as Head Women's Volleyball Coach at Lawrence University.

Coach Schoultz was Xavier High School's head varsity coach for 11 years. He led the program to 4 conference championships, 4 regional championships, 2 sectional championships and 2 WIAA state appearances.

Coach Schoultz has extensive experience coaching female athletes ranging from the age of 12-18. He coached for the Fox River Foxes Volleyball Club for 6 years. The last 12 years he has been director and coach for the FC Elite Volleyball Club.

Coach Schoultz has completed Level Three coaching certification through USA Volleyball. He has also attended and directed coaching clinics and has been a camp coach at many summer volleyball camps.

### **CAMP STAFF**

Darrin Matthies will be entering his 10<sup>th</sup> year as the Assistant Women's Volleyball Coach at Lawrence University. Darrin was the Junior Varsity Head Coach at Xavier High School for 4 years. He has also coached club volleyball for 11 years with FC Elite.

Heather Bolwerk will be entering her 2<sup>nd</sup> year as the Assistant Women's Volleyball Coach at Lawrence University. Heather played collegiate volleyball at UNC-Pembroke. She has also coached club volleyball for 2 years with FC Elite.

Additional staff will be made of current college players/students and members of the Lawrence University Volleyball team.



### **POSITION TRAINING AND INFORMATION**

**Hitter Training** – Increase your hitting skills by working on arm swing, footwork and body positioning. Work on various hits and attacking from all areas of the floor.

**Setter Training** – Increase your setting skills by working on hand positioning, body positioning and footwork. Work on varies sets, set location and consistency. We will use the Noah setting system.

**Libero/Def Specialist Training** – Increase your passing skills by working on serve receive and defensive techniques. Platform, body positioning and footwork will be emphasized.

**WHO:** Open to girls in 9<sup>th</sup> -12<sup>th</sup> grade.

**DATES:** Wednesdays  
May 6,13,20

**TIMES:** Time  
7:00pm – 8:00pm Hitters /Setters  
8:00pm – 9:00pm Libero/Defensive

**PLACE:** Alexander Gymnasium

**FEE:** \$30.00 – Includes Camp T-Shirt

### **EQUIPMENT NEEDED**

- ✓ T-Shirt
- ✓ Gym Shorts
- ✓ Volleyball Shoes
- ✓ Knee Pads

**ANY QUESTIONS**  
Please contact Matt Schoultz at 920-993-6280 or  
e-mail to [matthew.schoultz@lawrence.edu](mailto:matthew.schoultz@lawrence.edu)

Register/Pay Online At:  
[www.lawrence.edu/athletics/summer\\_camps](http://www.lawrence.edu/athletics/summer_camps)  
Lawrence Volleyball  
711 E Boldt Way SPC 16  
Appleton WI 54911

**REGISTRATION DEADLINE**  
May 1, 2015

**ENROLL EARLY!!!!**  
**CAMPS ARE LIMITED!!**

**Lawrence University Volleyball Camp Registration Form**    **Hitters** \_\_\_\_\_ **Setters** \_\_\_\_\_ **Libero/Def** \_\_\_\_\_  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Address \_\_\_\_\_ School In Sept 15 \_\_\_\_\_  
Home Phone \_\_\_\_\_ Grade in Sept 15 \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Adult T-Shirt Size Circle One: S M L XL  
E-Mail Address \_\_\_\_\_

**Health And Insurance Information**

I certify that the applicant is physically able to participate in volleyball camp and has adequate health insurance coverage. I hereby authorize the directors of the camp to act according to their best judgment in any emergency requiring medical attention.

Please note any medical conditions that we should be aware of \_\_\_\_\_  
\_\_\_\_\_

The name of our insurance company is \_\_\_\_\_  
The number of our policy is \_\_\_\_\_

**Please enclose the appropriate fee with this application. Make checks payable to Lawrence University Volleyball ONLINE REGISTRATION IS ALSO AVAILABLE@ LAWRENCE.EDU /ATHLETICS/SUMMER\_CAMPS**

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**ASSUMPTION OF RISK and RELEASE OF LIABILITY**  
**THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS – READ IT CAREFULLY**

I have applied to participate in the Lawrence University program described as the 2015 Spring Volleyball Clinics (“Program”) during the period May 6, 13, 20, 2015. I acknowledge that the Program is voluntary and may involve certain risks, including those described below.

I understand that by participating in the Program, I will engage in: strenuous physical activity with other participants, competition, recreational activities and, if applicable, reside in student dormitories and travel off campus. I acknowledge that these activities present certain inherent risks that are beyond Lawrence University’s control.

**I choose to participate in the Program understanding its associated risks, and knowingly and voluntarily assume all risks of collision, injury, illness, death or damage to or loss of my property that may occur while engaging in sports, recreation and any other activities arising out of or related to the Program.**

**I understand that I may discontinue participation at any time in light of the risks.**

**I hereby forever release Lawrence University, its trustees, officers, employees, and agents (the “Released Parties”), from liability for any negligent act or omission arising from my participation in the Program, including related costs, damages, claims or assertions to which I or my family, estate, or heirs may claim against the Released Parties.**

This Assumption of Risk and Release of Liability shall be construed in accordance with the laws of the State of Wisconsin, which shall be the forum for any lawsuits filed under or incident to this Release or the Program.

Print Full Name of Participant: \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Full Name of Parent/Legal Guardian: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_