

# JES BURKE'S VOLLEYBALL SPRING TRAINING



Come and experience...

## 2019 "SMASHTOWN" SPRING SESSIONS



## MARCH 22 – MAY 10

### GRADES 6-8

Join us for **7 days of Fun, Friends, and Volleyball this spring!** STM Volleyball Coach Jes Burke, along with current and former members of the 6-time State Champion program, will host a series of sessions in the Cougar Dome. **All abilities and levels of play are welcome, including beginners!** *We ensure small player to coach ratios!* We will provide a positive environment for young ladies to develop in the areas of setting, hitting, footwork, movement patterns, serving, passing, defense and effective communication.

#### DATES OF TRAINING

**WEEKDAYS 4-6pm**

**March 22; March 29**

**April 5; April 12; April 25; April 26**

**May 3; May 10**

#### WHERE TO GO

The Cougar Dome

450 E Farrel Rd.

Lafayette, LA 70508

#### WHAT TO BRING

Court shoes (volleyball shoes preferred)

Kneepads

Athletic shorts/top

Water bottle

Inhaler (if applicable)

#### COST

\$150 FOR 5 SESSIONS

\$200 FOR 8 SESSIONS

\$35 FOR INDIVIDUAL SESSIONS

#### ABOUT THE COACH

Louisiana Coach of the year

2010, 2012, 2013, 2015

All Acadiana Coach of the year

2010, 2012, 2014

Advocate Large Schools Coach of Year

2014, 2015

District Coach of the Year

2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018

[Jessica.Burke@stmcougars.net](mailto:Jessica.Burke@stmcougars.net)

2019 JESSICA BURKE'S SMASHTOWN

### YOUTH SPRING VOLLEYBALL TRAINING REGISTRATION FORM

Please make all checks payable to "Smashtown Acadiana" and send to 450 E Farrel Rd, Lafayette 70508 Attn: Jessica Burke

Name \_\_\_\_\_ Current Grade \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_

Check dates of attendance  March 22  March 29  April 5  April 12  April 25  April 26  May 3  May 10

LEGAL DISCALIMER: Must be signed by participant's parent or legal guardian before application can be accepted. I hereby release Jessica Burke and St. Thomas More Catholic High School, as well as all coaches, players, staff and affiliates of any liability or legal responsibility in the case of injury or bodily harm to the participant during the SMASHTOWN Volleyball Camp. I certify that the applicant is in good health and able to participate.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

