## **Georgia Volleyball Coaches Association**





Catherine Monroe- GVCA President www.gavolleyball.net

## 2023 GVCA Coaches Clinic Registration Form

Name: Job Title:						
School Name:						
School Address	:					
City/State/ZIP:						
Email Address (	(required):					
Phone Number	<u> </u>					
Mobile Number	: 					
	2023 GVCA Clinic	2721 Hog N	nty High School Iountain Road ille GA 30677 GVCA (AVCA) HS Current	ALL	TOTAL	
	<u>Options</u>		Member	NON-Members	IOIAL	
	Registration Options	Early Registration (Closes Apr 10th)	\$49	\$69	_	
		Pre-Registration (Apr 11-21)	\$49	\$79		
		On-Site Walk-up (Opens Apr 29)	\$59	\$79		
Payment Options	(Check One):					
Pay by <b>Cash</b>	Pay by <b>Check ma</b>	de out to 'AVCA'	Pay by Credit (	Card Visa M	asterCard	Discover AMEX
Name on Card:						
Card Number:						
Expiration Date:	e:Security Code:					
Signature:						
The 2023 GVCA clinic	edy Wells, 2365 Harro c is organized and hosted j	odsburg Rd., Suite A3 ointly by the AVCA and the	GVCA. The AVCA do	es NOT accept purcha	se orders. Ple	ase include payment

with the registration form. Pre-Registration and On-Site Registration will require payment at the time of registration. Make checks **payable to: AVCA**. Each individual registration must be on a separate membership form.