



Readington Township Recreation Department

Readington Travel Volleyball Program Girls

12U, 13U, 14U

2009-2010 Season

Mission Statement

The Readington Township Travel Volleyball program mission is to provide a wholesome and safe environment for the higher caliber of volleyball player to compete with like players of the same ability from other towns. This will allow the player to prepare herself for future competition at the High School Level.

Teams

Teams are comprised of a minimum of 8 players and will be formed based on several factors: numbers trying out at each age, available coaches and gym space. Please get involved. Coach's training and support provided.

Clinic Date

A free, "pre-tryout" clinic will be held on Sun., **Nov. 8th from 1:00-3:30** at RMS for any player interested in trying out for a travel team. High school and Junior Olympic coaches will provide instruction, run drills and share feedback to help players develop and hone their skills. Please complete the attached Registration Form prior to participation in either the Clinic or Tryouts.

Informational Meeting

Wed., Oct 14th, 6:45 p.m. at RMS. Registration to follow. Parents of new & returning players are encouraged to attend this important meeting

Cost

The fee for the 2009/2010 season is anticipated to be \$325. The fee to participate on a Readington Travel Volleyball Team includes the following:

1. Tournament and tri-match entry fees
2. Custodial costs for weekend gym usage
3. Referees costs
4. Equipment needs
5. League registration & insurance costs
6. Uniforms
7. Team pictures
8. Clinicians

Tryout Dates

Two tryout dates will be held for each age group in the RMS Old Gym. It is recommended that players attend both dates if possible.

12 & Under	Sunday, Nov. 15 & 22	12:00-1:30
13 & Under	Sunday, Nov. 15 & 22	1:30-3:00
14 & Under	Sunday, Nov. 15 & 22	3:00-4:30

Players will be notified by the end of the month as to whether or not they made a team. If so, additional registration forms must be completed and program fees submitted.

Practices & Tournaments

Teams will practice twice a week beginning in early December and continuing until about the first week of May. Skilled technical clinicians will work with the coaches and their players during one of their practices each week.

Teams will compete in approximately one full-day tournament per month as well as several tri-matches or scrimmages during the season. Events are usually within 1 to 1-1/2 hours of Readington.

Coaches

Applications are being accepted to coach teams at each of the 12U, 13U, 14U age levels. Candidates must be 18 years or older, of good character and moral standing, and have some knowledge of the game. All Readington Travel Volleyball Coaches must complete the R.U.T.G.E.R.S. and USAV IMPACT certification courses, as well as required criminal background check and finger-printing procedures.

If interested please fill out an application which is available on the Readington Twp website mentioned below. Mail to Recreation Director, Greta Kenney, at 509 Rt 523, Whitehouse Station, NJ 08889 or fax to (908) 534-0038

Additional information & forms can be found at http://www.readingtontwp.org/rec_volleyball.html
Email: rec@readingtontwp-nj.org

Readington Girls Travel Volleyball

Clinic/Tryout Registration

Player Name: _____

Birth Date _____

Address _____

City _____ State _____ Zip _____

Father's Name _____

Home Phone _____ Cell _____

Work Phone _____

Mother's Name _____

Home Phone _____ Cell _____

Work Phone _____

Email Address _____

Check Age Level: (age as of 9/1/2010)

12UGirls (6th & Under)

13UGirls (7th Gr.)

14UGirls (8th Gr.)

Check here if you are interested in being a coach, assistant coach or team rep.

For Office Use Only

Tryout # _____

PLEASE READ AND SIGN BELOW

Readington Recreation Sports Philosophy & Priorities

The Readington Township Travel Volleyball program mission is to provide a wholesome and safe environment for the higher caliber of volleyball player to compete with like players of the same ability from other towns. This will allow the player to prepare him/herself for future competition at the High School Level.

Priorities of our Program in order of importance are:

1. Provide a safe environment to learn and play the sport.
2. Develop Self-Esteem — positive reinforcement...
3. Fun — and good sportsmanship
4. Teamwork — develop team skills, not stars
5. Develop individual skills and measure against child's starting points

Players Good Sportsmanship:

1. Play Fair. Learn the rules & play by them. Be a team player
2. Work hard to improve your skills and never give up
3. After the game, win or lose, congratulate the other team with a handshake
4. Respect your coaches, teammates, opponents, referees and The Sport
5. Clap for an injured opponent when she gets up to leave the game

Parents Code Of Conduct:

1. Be a good role model. Encourage fair play and exhibit good sportsmanship at all times.
2. Exalt hard work over outcome & define success as doing your best and trying your hardest.
3. Provide positive reinforcement to all players & cheer for all good plays including those by the other team.
4. Be considerate of the feelings of all players.
5. Learn the rules & strategies of the game but refrain from coaching from the sideline. Leave that to the coach!!!
6. Never challenge a call by the referee or say anything derogatory about a coach or player.
7. Help your child accurately assess their performance in a supportive manner.
8. Be punctual. Make sure your child attends practices & games. Let the coach know if the player cannot make it.

I understand that in the event my child is injured as a result of participation in any recreational activity in connection with this program, that reasonable efforts will be made by Readington Township, Recreation Committee or persons authorized on their behalf to contact me. However, if it is determined by a Certified EMT Volunteer, Police Officer, Physician or Surgeon that my child named above is in need of emergency medical or surgical treatment, then I give consent to such treatment.

Parent (or Guardian) Signature _____ Date _____

Player Signature _____ Date _____

Parent Name (PRINTED) _____

Mail Completed Registration form to:

Michele Keefe

202 Hankinson Rd

Flemington, NJ 08822

Phone: 908-788-5059