

# CAMP STAFF



## CO-DIRECTOR/OWNER

**LINDSAY BIRCH** finished her 17<sup>th</sup> season as Head Coach at CNU by leading her team to the school's 12<sup>th</sup> consecutive trip to the NCAA Tournament. The 2018 season ups Birch's overall record to 521-123 (.81 winning %) and conference record to 213-11 (.95 winning %). Birch, a Williamsburg native and Bruton High School graduate, is the winningest coach in CNU Volleyball history and has paved the way for countless program firsts and school records. A Hall of Fame player in her own right, Birch has been a part of nearly all the turning points in CNU Volleyball history.

CONTACT INFO: [captainsvolleyballcamp@gmail.com](mailto:captainsvolleyballcamp@gmail.com), 757-286-2392

### *The Birch Era...*

- 🏆 2011 NCAA Runner-up & 2012 NCAA Final Four
- 🏆 3 NCAA Elite Eight appearances in 2009, 2010 & 2014
- 🏆 14 regular season Conference Championships
- 🏆 14 Conference Tournament Championships
- 🏆 Undefeated in conference play '07-'16  
(138 match conference win streak, 4<sup>th</sup> longest in NCAA Volleyball history)
- 🏆 2-time AVCA Region Coach of the Year
- 🏆 11-time Conference Coach of the Year
- 🏆 11-time VaSID Virginia State Coach of the Year
- 🏆 15 NCAA Tournament appearances in 17 years
- 🏆 Coached 29 All Americans & 11 Conference Player of the Year recipients

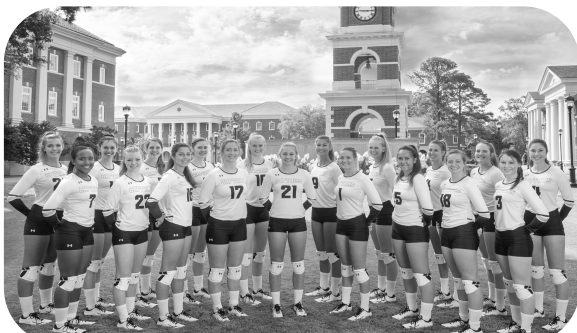


## CO-DIRECTOR

**CORY TAYLOR** finished her 7<sup>th</sup> season as the top Assistant Coach & Recruiting Coordinator for CNU Volleyball. In her six seasons as an Asst. Coach, Taylor helped the Captains win the Capital Athletic Conference five times and win an average of 29 matches. A four-year starter at Outside Hitter for the Captains from 2009-2012, Taylor enjoyed a remarkable playing career. She was named All Conference each of her four seasons and finished her time on the court with 1322 kills (5<sup>th</sup> all-time at CNU), 1320 digs (6<sup>th</sup> all-time at CNU), 4206 total attack attempts (3<sup>rd</sup> all-time at CNU), 545 sets played (2<sup>nd</sup> all time at CNU) and 163 total blocks. A Williamsburg native and Jamestown High School graduate, Taylor has been instrumental in the success of Captains Volleyball Camps over the past ten years as a lead instructor, Assistant Director and currently the Co-Director.

## CAMP STAFF

### CURRENT & FORMER CNU VOLLEYBALL PLAYERS



**CAPTAINS VOLLEYBALL CAMP**  
Lindsay Birch, Camp Director/Owner  
102 Joel Lane  
Yorktown, VA 23692

# CAPTAINS VOLLEYBALL CAMP



# SKILLS CAMP

**July 15-18, 2019**

## CAMP OPTIONS

OVERNIGHT Camper \$495

*For rising 7<sup>th</sup>-12<sup>th</sup> grade*

10 instructional sessions, all meals in Cafeteria,  
overnight lodging in Residence Hall, t-shirt & camp ball

EXTENDED-DAY Camper \$375

*For rising 6<sup>th</sup>-12<sup>th</sup> grade*

10 instructional sessions, t-shirt & camp ball,  
dinner in Cafeteria (must bring bag lunch)

## WHY CAPTAINS VOLLEYBALL CAMP?

-High-level training

-Fundamentals & FUN!

-Energized & passionate coaching staff

-Beautiful campus & award-winning facilities

-Skit Night & Wacky Olympics

-Prizes, freebies & giveaways

*Our goal is for each camper to make new  
friends, create awesome memories & develop  
improved skills to take your next step in Volleyball.*

## TENATIVE SCHEDULE

**Monday, July 15** 10am–10:30am OVERNIGHT check-in at Residence Hall  
12pm–12:30pm EXTENDED-DAY check-in @ Freeman  
12:30pm–1:15pm ALL CAMPERS Skills Testing  
8:30 pm EXTENDED-DAY picked up from Freeman

**Tuesday, July 16** 9:30 am Camp begins (ALL CAMPERS)  
8:30 pm EXTENDED-DAY picked up from Freeman

**Wed., July 17** 9:30 am Camp begins (ALL CAMPERS)  
8:30 pm Skit night (parents welcome to attend)  
9:30 pm EXTENDED-DAY picked up from Freeman

**Thursday, July 18** 9:30 am – 4:00 pm ALL CAMPERS (parents welcome)

**Camp typically sells out by mid-June. Register early!**

**[WWW.CAPTAINSVOLLEYBALLCAMP.COM](http://WWW.CAPTAINSVOLLEYBALLCAMP.COM)**

# SKILLS CAMP ENROLLMENT FORM

CAMPER's Name \_\_\_\_\_

☐

**OVERNIGHT CAMP \$495**

☐

**EXTENDED-DAY CAMP \$375**

**\$50 LATE FEE FOR REGISTRATION RECEIVED AFTER JUNE 15**

Make checks payable to  
**LINDSAY BIRCH, CAMP DIRECTOR**  
102 Joel Lane  
Yorktown, VA 23692

Camper's T-Shirt Size (circle)

YL(youth L)    S    M    L    XL

D.O.B. \_\_\_\_\_ Age at time of camp \_\_\_\_\_

Grade (fall 2019) \_\_\_\_\_

Address \_\_\_\_\_

Parent #1 \_\_\_\_\_ Cell \_\_\_\_\_

Parent #2 \_\_\_\_\_ Cell \_\_\_\_\_

Email address for enrollment confirmation: (please write clearly)  
\_\_\_\_\_

**OVERNIGHT CAMPERS ONLY:** Name of desired roommate (we  
will do our best to accommodate)

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

## Health History

Allergies?: \_\_\_\_\_

Asthma?: \_\_\_\_\_

Special diet required?: \_\_\_\_\_

History of fainting?: \_\_\_\_\_

Operations/Serious illness/injuries?: \_\_\_\_\_

Any restrictions from physical activity?: \_\_\_\_\_

Any medications that need to be taken during camp? List  
name of drug and dosage information: \_\_\_\_\_

Any medical conditions that require special attention?  
\_\_\_\_\_  
\_\_\_\_\_

**The Dining Hall Staff is very familiar with all food allergies/sensitivities.  
Options for all diets are available at each meal.**

## Volleyball Experience

School Name \_\_\_\_\_

Club Team \_\_\_\_\_

Years played \_\_\_\_\_

Position \_\_\_\_\_

Skill Level/Add'l Comments \_\_\_\_\_

## Liability Release

I, the parent of \_\_\_\_\_, understand that participating in any sport, including camp, there is a risk of injury which could result in serious or permanent injury, paralysis or death. To minimize the risk of injury, I agree to tell my child to obey all safety rules and to report fully any problems related to his/her physical condition to the camp coaches. In consideration for accepting my child into camp, which uses university facilities, I hereby agree that I am and shall be responsible for all costs associated with any injury or loss that may be sustained by my child as a result of his/her participation at the camp. By signing below, I agree to release and promise not to sue the Commonwealth of Virginia, Christopher Newport University or their employees for any damages, loss injury or death arising from my child's participation in camp, unless such damages, loss, injury or death are caused by the gross negligence or intentional gross misconduct of such employees.

Signed \_\_\_\_\_ Date \_\_\_\_\_