



Kentucky Volleyball Coaches Association

Brad Wilson - KVCA Secretary
2365 Harrodsburg Rd, Suite A325
Lexington, KY 40504
<http://www.kvca.org/>

2026 KVCA Coaches Clinic Sign-up

Name: _____

School Name: _____

Address: _____

Email Address (required): _____

Phone Number: _____

This year's clinic will take place at **Scott County High School** in Georgetown on **Saturday, July 18.**

**Scott County High School
1051 McClelland Circle
Georgetown, KY 40324**

Online registration can be completed using a link at <https://www.avca.org/event/2026-kvca-summer-coaches-clinic/>

2026 Clinic Options

		<u>High School Head Coach</u>	<u>H.S. Assistant, Middle School or Club Coach</u>	<u>Total</u>
Registration Options Includes the Clinic, KVCA Membership, and AVCA Membership	Clinic Reg + Membership	\$125	\$125	_____
Assistant Coach Option ONLY Includes the Clinic but does NOT include KVCA/AVCA Membership	Clinic Reg	N/A	\$50	_____

Payment Options:

Pay by Cash

Pay by Check

Pay by Credit Card

__ Visa

__ MasterCard

__ Discover

__ American Express

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Signature: _____

Send this form and payment to:

AVCA, c/o Brad Wilson, 2365 Harrodsburg Rd., Suite A325, Lexington, KY 40504; Fax: 859-317-4212

The 2026 KVCA clinic is being hosted and organized by the American Volleyball Coaches Association (AVCA). The AVCA does NOT accept purchase orders. Please include payment with the registration form. **Please do not send your registration without payment. Make checks payable to: AVCA.** Each registration must be on a separate membership form.