

# **Kelvin Grove State College**

The Pursuit of Excellence With All Our Might

# **Volleyball Excellence Application Form**

Personal Details			
NAME:DATE OF BIRTH:			
ADDRESS:			
PARENT/GUARDIAN NAM	ИЕ:	PHON	IE NUMBERS:
School Details			
Present School:			
KGSC intended enrolmer	nt: Grade	Year 20	
Volleyball Experience			
Outline your volleyball e	xperience.		
			<del></del>
If selected what are you	hoping to gain from being i	n Volleyball Excellence?	
Outline your other sport	ing achievements (outside	of volleyball).	
Behaviour Record			
	eferees with address and plot attach a copy of your mos		y contact to verify a proven record card.
Referee Name	Address	Telephone	Email

## Certification

I certify that the information contained in and accompanying this application is correct and complete. I understand that the provision of misleading information may lead to the cancellation of my application.

SIGNED:	(Applicant)
WITNESSED:	(Parent/Guardian)
DATE:	

#### Please note:

Volleyball Excellence will run as one of your student's subjects within the curriculum, with 3 x 70 minute lessons per week.

The current fees are available on request. The fees cover the following:

- Court hire for training
- Coaching
- Weekly Strength and Conditioning sessions
- Physiotherapy Screenings
- Nutrition sessions
- Training uniform
- Jersey for matches
- Volleyball Queensland Registration
- Nomination fees for Queensland Schools Cup events
- Refereeing Course

### The fees do not cover:

Accommodation, transport and meals for events away from Brisbane, such as Queensland
Intermediate Schools Cup in Toowoomba, and Australian Volleyball Schools Cup in Melbourne

### **Further information to note:**

• Please note that enrolment in any of the excellence programs will limit the range of elective subject options that students have.

Please return completed forms to:

Lachlan Dignan

Volleyball Excellence Coordinator

Email: ldign0@eq.edu.au