

**Jim McLaughlin Volleyball Team Camp
at the University of Washington**

Coach Info Sheet

Team Name _____ # of resident campers _____
of commuter campers _____

Head Coach name _____ t-shirt size _____

cell phone _____ email _____

Staying in the dorm? Yes ___ No ___
room mate preference _____
Eating on Campus? Yes ___ No ___

Assistant Coach name _____ t-shirt size _____

cell phone _____ email _____

Staying in the dorm? Yes ___ No ___
room mate preference _____
Eating on Campus? Yes ___ No ___

Assistant Coach name _____ t-shirt size _____

cell phone _____ email _____

Staying in the dorm? Yes ___ No ___
room mate preference _____
Eating on Campus? Yes ___ No ___

Please fax or e-mail this form to:

macsportsamps@hotmail.com

or

425-828-6150

phone and fax