

# Ogallala Volleyball Summer Camps

COACH: STEVE MORGAN

ONE OF NEBRASKA'S BEST OVERALL RECORDS IN THE HISTORY OF HIGH SCHOOL VOLLEYBALL – 984 WINS

NEBRASKA'S WINNINGEST COACH FOR OVER 30 YEARS

HEAD COACH, OGALLALA HIGH SCHOOL VOLLEYBALL

45 YEAR RECORD – 984 WINS, 217 LOSSES

NEBRASKA STATE CHAMPIONS – 1975, 1983, 2001

1988, 1992, 1994 AND 1995 NEBRASKA STATE RUNNER-UPS

35 CONFERENCE CHAMPIONSHIPS IN THE PAST 45 YEARS

45 CONSECUTIVE WINNING SEASONS

HEAD COACH, UNITED STATES VOLLEYBALL ASSOCIATION, MID-AMERICA TEAM

KMCX COACH OF THE YEAR

HEART OF AMERICA CLASS B COACH OF THE YEAR

HEAD COACH OF NEBRASKA EAST-WEST ALL-STAR TEAM – 1984, 1985, 2006

HEAD COACH OF NEBRASKA NORTH-SOUTH ALL-STAR TEAM – 1987, 2001

NCA NEBRASKA COACH OF THE YEAR – 1987, 2001

LINCOLN JOURNAL & STAR COACH OF THE YEAR – 2001

OMAHA WORLD HERALD COACH OF THE YEAR – 2001

HONORABLE MENTION – UNITED STATES VOLLEYBALL ASSOCIATION

MILESTONE AWARD WINNER – LEVEL I, II, III AND IV

KEITH COUNTY ALL AREA COACH OF THE YEAR – 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2017

NCA VOLLEYBALL AWARD – 2008

NEBRASKA HIGH SCHOOL SPORTS HALL OF FAME INDUCTEE – 2012

Youth  
Programs  
Inc.

**Health & Insurance:** All participants should be covered by family or personal medical insurance. Each participant is requested to provide their insurance company name, company address, policy number, and the name of the policy owner.

Instruction stresses the fundamentals of power volleyball and is designed to smooth out problem areas on an individual basis.

\* If your team plans to attend team camp, it is vitally important that the **basic fundamentals are mastered** before your team can get the full benefits from this camp. When you reserve spots for team camp, **please specify number of teams coming** from your school.

All Team Campers must be accompanied by a coach or a sponsor. The **minimum** number of team members accepted will be **eight**. Borrowing an additional team member from another team or town is acceptable.

If you are attending team camp, please bring your own balls for warm up.

Team Camp Coaches remember to bring prewrap and tape for your athletes.

**Volleyball court facilities located at the Ogallala Auditorium located at 514 East B Street. Team Camp report to the Ogallala High School located at East 6th & G Street.**

Equipment needed: tennis shoes, knee pads, shorts, T-shirts, socks, etc.

Information on lodging **on request**.

Camp T-shirts will be available.

All registrants will receive a confirmation of acceptance to camp.

**If several members of your school plan to attend the same camp, please send your applications in as close together as possible to help insure attendance at the same camp.**

Visit our website at [www.stevemorgancamps.com](http://www.stevemorgancamps.com) For questions: [skmorgan@charter.net](mailto:skmorgan@charter.net)

\$20.00 non-refundable deposit must accompany registration. Make checks payable to Youth Programs, Inc. Please fill out the application on the reverse side and return by June 3, 2020. We will continue to accept applications after June 3 until all camps are filled. Camps will be limited. Applications will be processed on a first-come basis. Past camps have filled quickly.

Send Application to: **Ogallala Volleyball Summer Camps**

**Steve Morgan**

**413 Mako Ch Mni**

**Ogallala, NE 69153-5809**

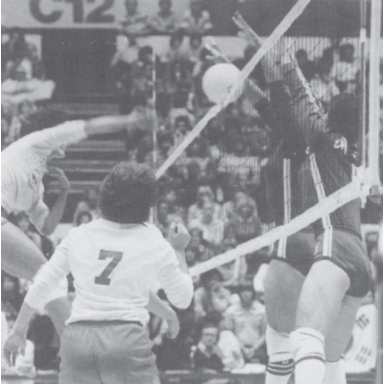
**(308) 284-2836**

# 2020 Ogallala Volleyball Camp

Conducted by

Coach Steve Morgan

Grades 3 - 12



## INDIVIDUAL CAMPS

**Grade Levels 3-8 Cost - \$65.00**

Hours: 9:00-11:30 a.m. & 1:00-3:30 p.m.

June 15-17, 2020

June 22-24, 2020

July 8-10, 2020

**Grade Levels 9-12 Cost - \$75.00**

Hours: 8:00 a.m.-12:00 p.m. & 1:00-3:30 p.m.

June 25-26, 2020

## TEAM CAMPS

**Grade Levels 9-12**

**Cost - \$75.00 per Team Member**

Hours: 8:00-12:00 noon & 1:00-5:00 p.m.

July 13-15, 2020

July 16-18, 2020

**All team camp registrations and fees are due July 1, 2020.**

**Your registration is not complete without all forms and payment.**

Ogallala Volleyball Summer Camps  
Steve Morgan  
413 Mako Ch Mni  
Ogallala, NE 69153-5809  
skmorgan@charter.net

Camp Dates This Application Covers \_\_\_\_\_ (Team Camp Only) Coach \_\_\_\_\_

Name \_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Team Camp only – Coach's Home Phone \_\_\_\_\_ Coach's Cell Phone \_\_\_\_\_

Grade (Fall 2020) \_\_\_\_\_ High School \_\_\_\_\_

Mail Application with \$20.00 Deposit to: **Ogallala Volleyball Summer Camps, Steve Morgan, 413 Mako Ch Mni, Ogallala, NE 69153-5809**

### AUTHORIZATION

We, the undersigned parents or guardians of \_\_\_\_\_, a minor, do hereby authorize the directors of the Ogallala Volleyball Summer Camps or their designee to select hospital facilities and/or a physician of their choice and authorize treatment of the above named camper on an emergency basis in the event such treatment becomes necessary as a result of the participation in the Volleyball Camp. We hereby grant permission for her to participate in the Volleyball Camp and acknowledge the fact that she is physically able to participate in camp activities. The parent or guardian assumes responsibility for any damage done by the above named to property. The athlete will obey all Ogallala Volleyball Camp regulations or be subject to dismissal from the program and sent home at the athlete's expense. The signature of the parent or guardian relieves the Ogallala Public Schools, Ogallala Volleyball Summer Camp and their delegated representatives of any and all liability.

Date \_\_\_\_\_ Parent / Guardian Signature \_\_\_\_\_

### HEALTH INSURANCE INFORMATION

Name of Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Company Address \_\_\_\_\_ Policy Owner \_\_\_\_\_