
Coed Volleyball Camps

We are pleased to announce two unique four-day skills camps at Fox Chapel. Featuring some of the best junior coaches nationwide.

These are the same coaches you would work with if you were selected to go to Long Beach, California for the Olympic Development program by USA Volleyball

Jason Kepner : Assistant Coach University of Pittsburgh, USA National Development Camp Coach, USA National Development Camp Coach

Tim Johnson: Head Coach Golden West College, 2003 California State runners up. USA National Development Camp Coach, Surf City Volleyball Club

Kris Scigliano: Head Boys Coach Central Catholic, Head Girls Coach Fox Chapel Area School District, USA National Development Camp Coach, Surf City Volleyball Club

Phil O'Keefe: Head Boys Coach Fox Chapel Area School District, Head Boys Coach Renaissance 16 Open Team, Former Professional Volleyball Player (France)

Melissa Myers: Head Coach California State University of Pennsylvania, Former Assistant Men's Coach Juniata College, All-American Juniata College

Julie Webb: Head Coach Carnegie-Mellon University, 1999 University Athletic Association (UAA) Coach of the Year



Address Correction Required

Kris Scigliano
1034 Jancey St.
Pittsburgh, PA 15206



Surf City Volleyball Skills Camps



July 25-28 or
August 1-4

1-5 PM Monday-Friday at
Fox Chapel High School



Do the Math

Sign-up Form

↗ Duquesne skills camp costs:
\$310 (for commuters)

↗ Penn State skills camp costs:
\$300 (for commuters)

↗ Fox Chapel Skills Camp costs
\$185 for Fox Chapel District
students (non-foxes \$195)

↗ Featuring Jason Kepner, Tim
Johnson, Melissa Myers, Julie
Webb, Phil O'keeffe, & Kris
Scigliano



Yes! Sign me up for:

- | | <i>Time</i> | <i>Price</i> |
|-------------------------------------|-------------|--------------|
| <input type="checkbox"/> July 25-28 | 1-5 PM | \$195 |
| <input type="checkbox"/> August 1-4 | 1-5 PM | \$195 |

Participant Name _____

Address _____

Phone _____

Email _____

Men's adult T-shirt size _____

Detailed camp information will be provided upon receipt of your check. All campers must have their own family medical insurance coverage policy. No one connected with the camp assumes responsibility for medical, dental or any other type of accidental expenses incurred as a result of injury or illness.

Parent Signature of consent to terms _____ Date _____

Health Insurance Provider _____ Policy # _____

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