



Illinois Volleyball Coaches Association

Molly DeSerf - IVCA President

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2026 Illinois Volleyball Coaches Association (IVCA) Clinic Registration Form

Name: _____

Job Title: _____

School Name: _____

School Address: _____

City/State/ZIP: _____

Email Address (required): _____

Phone Number: _____

Mobile Number: _____

This year's clinic will take place at **Bolingbrook High School** on Saturday, August 8, 2026.
FOLLOW IVCA on Facebook/X @IVCacoaches or visit ivcacoaches.org for event updates.

Bolingbrook High School
365 Raider Way
Bolingbrook, IL 60440

<u>2026 IVCA Clinic Options</u>	<u>IVCA/AVCA Members</u>	<u>ALL NON-Member Coaches</u>	<u>TOTAL</u>
Registration Options *INCLUDES LUNCH	Early Registration (Thru 6/29)	\$75*	\$85*
	Pre-Registration (6/30 -8/2)	\$80*	\$100*
	On-Site Walk-up (Opens 8/8)	\$90*	\$115*

Payment Options (Check One):

___ Pay by **Cash** ___ Pay by **Check made out to 'AVCA'** ___ Pay by **Credit Card** ___ Visa ___ MasterCard ___ Discover ___ AMEX

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Signature: _____

Mail this form and payment to:

AVCA (IVCA Clinic), 2365 Harrodsburg Rd., Suite A325, Lexington, KY 40504; Questions: highschoolcoaches@avca.org

The 2026 IVCA clinic is organized and hosted jointly by the IVCA and AVCA. The AVCA does NOT accept purchase orders. Please include payment with the registration form. **Pre-Registration and On-Site Registration will require payment at the time of registration.**

Make checks payable to: AVCA. Each individual registration must be on a separate membership form.