

SPIKES!!

Grades 5 & 6

(& grade 4's who play on their school team)

Spikes Mission:

- * to get kids excited about playing volleyball!!
- * to establish a technically sound skill base!!
- * to create a fun, yet competitive environment!!
- * a place where kids can experience success!!



SPIKES Increases the FLOW!!

The fun stops when the ball drops!! Excitement is generated when the rally continues!! Spikes modifies the game to promote rallies and to increase the number of touches!!

Modifications :

- play is initiated by a toss from the coach as well as serve
- *toss in* increases game speed so more touches per session
- emphasis is on pass – set – hit
- games are played cooperatively as well as competitively
- points are given for 3 touches per side
- participants are divided into teams based on experience and skill level – everyone plays where they are challenged!!



experience this !

Spikes Program Details



Location: Central Community Church

Address: 680 York Road

Start date: Tuesday, September 15th, 2026

Time: 6:00- 7:10pm

Cost: \$170.00

Duration: 8 weeks

To Register

Fill out registration form and scan to

schulzy2@sympatico.ca

Space is limited!! Register today!!

Registration fee: \$170.00

Etransfer \$170.00 to schulzy2@sympatico.ca

Please add your child's name in the memo box

Please use the password volleyball

Fall 2026 SPIKES Registration

Name: _____ Gender : Male Female

Date of Birth: _____

Parent's E-mail: _____

Parent/Guardian Name: _____ Parent/Guardian Phone: _____

Medical Concerns: _____

Personal Information & Photo Release, Waiver and Indemnification: I understand Ontario Volleyball (OVA) gathers personal information about each of its participants, including name, address, email, telephone number, gender and date of birth. This information is used for the purpose of communications from OVA with regard to OVA programs, events, promotions, and sponsorships. The information is also used by Volleyball Canada for annual registration and membership demographics. OVA requests medical and emergency contact information to use in case of a medical emergency.

I understand that Ontario Volleyball has the right to take photographs, videotape, or digital recordings of me at its programs, to be used in any and all media. I am aware that by giving consent, I am permitting my name and image to be posted on the OVA website, provided to media, and used in publications, which can be viewed by anyone who accesses the OVA website, external media, or publications. I understand that I may withdraw consent to the collection, use or disclosure of my personal information at any time by contacting the OVA Privacy Officer (privacy@ontariovolleyball.org).

Upon acceptance as a participant of Ontario Volleyball, I agree to abide by the rules and procedures of the OVA as approved through the By-Laws, Rules and Regulations of the OVA. As a participant of the OVA I shall uphold the high standards of the OVA and shall never do anything to damage the reputation of the OVA. I understand and agree that the OVA and/or any of its coaches, program coordinators, officials, affiliates, or sponsors are not responsible for any injury, damage or loss resulting from my accident from known or unknown conditions howsoever caused. I also understand and agree that any violation of this contract may result in the immediate termination of my participation.

Date: _____

Parent/Guardian Signature: _____



experience this !