

## SCVA Letter of Commitment – Junior Girls

(Non San Diego Members)

DO NOT SIGN WITHOUT READING CAREFULLY. DO NOT SIGN PRIOR TO AUGUST 6, 2018 (15-18&UNDER AND ALL HIGH SCHOOL AGED PLAYERS), OR OCTOBER 8, 2018 (14&UNDER).

This requirement has been created to protect the player and parent/guardian as a member of a club.

1. Basic Penalty. I understand that by signing this letter. I am committed to joining the club named with this document for the entire 2018/2019 season. If I compete for another club, I may be subject to suspension for the remainder of the season.
  - a. Early Signing Period. A player who signs a Letter of Commitment before August 6, 2018 (15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or October 8, 2018 (14&under) is subject to suspension for the entire season. A club representative may not ask a player to sign prior to August 6, 2018 (15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or October 8, 2018 (14&under) either.
  - b. A player may not sign a Letter of Commitment before August 6, 2018(15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or October 8, 2018 (14&under) regardless of the date of the tryout. A player who signs a Letter of Commitment or a club that allows a player to sign at a tryout date prior to August 6<sup>th</sup> (15-18&under) or October 8<sup>th</sup> (14&under) is subject to suspension for the entire season. Under no conditions may the Letter of Commitment be pre-signed or pre-dated before this time frame. In turn, no deposit monies, team or club fees can be collected before August 6, 2018 (15-18&under) or October 8, 2018 (14&under).
  - c. Only One Letter of Commitment Permitted. A player who signs more than one Letter of Commitment with more than one club is subject to suspension for the entire 2018/2019 season.
2. Verbal Commitments. A player may commit verbally to a club prior to August 6, 2018 (15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or October 8, 2018 (14&under). A verbal commitment is not binding. The player may revoke the commitment at any time, before signing the Letter of Commitment, without penalty.
3. Recruiting Ban after Signing. I understand that all clubs are obligated to respect my signing and shall cease to recruit me upon my signing this document. I shall notify any recruiter who contacts me that I have signed.
4. Club Signatures Required Prior to Submission to the SCVA. This document must be signed and dated by the Club Director before being submitted to the SCVA along with other registration documents.
5. Parent/Guardian Signature Required. My parent, or legal guardian, is required to sign this Letter of Commitment if I am less than 21 years of age at the time of signing.
6. Falsification of Letter of Commitment. If I falsify any part of this Letter of Commitment, including the date, I understand that I am subject to suspension for the entire 2018/2019 season.
7. Nullification of Other Agreements. My signature on this Letter of Commitment nullifies any agreements, verbal or otherwise, which would release me from the conditions stated within this document.
8. Binding Agreement. I understand that I have signed this Letter of Commitment with the club and not with a particular individual. If the coach or any player(s) leave the team, I remain bound by the provisions of this document. I certify that I have read all terms and conditions in this document. I have discussed them with the club representative named within, and I fully understand, accept, and agree to be bound by them.

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**NOTE: IT IS A VIOLATION OF SCVA POLICY TO POST-DATE THIS DOCUMENT**  
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Club Name: \_\_\_\_\_

Team Name: \_\_\_\_\_

Player's Name: \_\_\_\_\_

Player's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Phone #: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Club Director: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Elite Volleyball Club Inc.**  
8335 Winnetka Ave #179  
Winnetka, CA 91306  
ph:818-325-6151  
fax:806-537-4431  
email: elitevbc@elitevbc.com

**To All Elite Volleyball Club Inc. Clients:**

**As many of you now know, we are starting a new billing and payment procedure. We will no longer be emailing invoices unless you would like a hard copy to accompany your work. This season we will be direct debiting and withdrawing payment directly from any account you choose. Each scheduled withdrawal will be preceded by at least a 3 day notice.**

**Please complete the bottom portion of this letter and return it to us.**

**If you would like to receive hard copies of your invoices, please mark your preference below.**

**I would like to receive my invoices by email \_\_\_\_\_ fax \_\_\_\_\_ (please X after your preference).**

**My email address is: \_\_\_\_\_**

**I understand and agree that a withdrawal will be made from my checking account for the membership services rendered by The Elite Volleyball Club Inc. Please attach a voided check.**

**I agree to have payment withdrawn from my account as described above.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Signature (if two parties need to sign)**

\_\_\_\_\_  
**Print Name**



# 2018-2019 INDIVIDUAL MEMBERSHIP FORM

This application, the USAV Code of Conduct and Waiver and Release of Liability must be read and signed before the USAV registrant/RVA member listed on the application is allowed to take part in any sanctioned activity (by example only: training, competition, practice/warm-up sessions, meeting or testing sessions). This application must be completed legibly, only by the applicant and/or his/her parent/guardian, with accurate personal information that pertains to the applicant. Membership with USA Volleyball is individual and is **not transferable** from one person to another. Additional RVA requirements may apply.

## MEMBERSHIP APPLICATION

FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

Check box if name has changed in the past year. If yes, please provide previous name: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

CLUB NAME: \_\_\_\_\_

\*\*\*\*Required for all Junior Club Staff: Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (For Adult Staff Membership Only)

GENDER:  Male  Female E-MAIL: \_\_\_\_\_

JUNIORS ONLY: (USA Volleyball does NOT provide e-mail addresses to third part)

GRADE (2018/2019 School Year) \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

HIGH SCHOOL GRAD YEAR \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

Check box if you do NOT wish to be on USAV master 3<sup>rd</sup> party list.  Check box if you do NOT wish to receive USAV electronic news.

USA Volleyball is committed to diversity. This information is used to report aggregate data to the United States Olympic Committee. Please check one of the following:

- I choose not to respond
- American Indian or Alaskan Native, not Hispanic or Latino
- Black or African American, not Hispanic or Latino
- Two or more races, not Hispanic or Latino
- White, not Hispanic or Latino
- Asian, not Hispanic or Latino
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander, not Hispanic or Latino

Are you:  Hearing impaired/deaf (for USA Deaflympic Talent ID)  Disabled Physically (for Paralympic Talent ID)

### Membership Options (Annual fees per person)

- |  |         |  |         |
|--|---------|--|---------|
| <input type="checkbox"/> Adult Staff Membership      | \$75.00 | <input type="checkbox"/> Adult Player Membership                   | \$65.00 |
| <input type="checkbox"/> Senior Membership (Age 60+) | \$35.00 | <input type="checkbox"/> Referee Membership                        | \$65.00 |
| <input type="checkbox"/> Junior Membership           | \$65.00 | <input type="checkbox"/> Extended Official:                        | \$10.00 |
| <input type="checkbox"/> Chaperone Membership        | \$55.00 | <input type="checkbox"/> Optional Donation to USA Team Programs. * | \$5.00  |

\*\$1 will be donated to each: Men's and Women's National Teams, High Performance Girls and Boys and Regional Junior Development

### Participant Role(s)

(Check all that apply – Depending on selection, additional requirements may apply)

- Player  Head Coach  Assistant Coach  Team Rep  Chaperone  Referee  Other \_\_\_\_\_

### ACKNOWLEDGEMENT/USE AGREEMENT

- I, a prospective or current member of USA Volleyball and/or one of its Regions, agree to abide by and be bound by the applicable Bylaws, rules, regulations, Code of Conduct, competition rules of USA Volleyball, as well as the safe sport rules, policies and procedures promulgated by the U.S. Center for SafeSport, as they may be amended from time to time. I agree to be subject to the jurisdiction of the U.S. Center for SafeSport and agree that any sanctions imposed by the Center extend to my participation in all USA Volleyball events or activities, or events and activities of other NGBs, and may be posted publicly and include information regarding the misconduct involved.
- I agree that I will abide by the rules and guidelines regarding club affiliation as established by the Regional Volleyball Association in which I am applying for membership.
- I hereby agree to be filmed, videotaped and photographed, and to have my name, image, picture, likeness, voice and biographical information otherwise recorded, in any media, during USA Volleyball (USAV) and/or its Regional Volleyball Association (RVA) sanctioned events, by USAV/RVA's authorized representative, under the conditions specified by the USAV/RVA (the "Footage").
- I hereby grant USAV/RVA, with no financial or other compensation due to me, full right and license to use, and to authorize third parties to use, in all media, the Footage for: (1) news and information purposes, (2) promotion of the specific competition(s) in which I compete, (3) promotion of the Sport, and (4) promotion of USAV/RVA, provided that, in no event may the USAV/RVA use or authorize the commercial use of the Footage in any manner that would imply my endorsement of any company, product, or service, without my written permission.
- The current FIVB Sports Regulations stipulate that the Federation that is the first to issue a national license for the player is considered to be the player's Federation of Origin regardless of the player's citizenship. The current FIVB interpretation of "issue a national license" means registering with the Federation (in our case, USA Volleyball). Therefore, please be advised that if you register with USA Volleyball, and subsequently desire to represent another country in international competition, you may be subject to the FIVB regulations regarding "Change of Federation of Origin" which includes the payment of significant fees to the FIVB and review and approval of such application by the FIVB.
- I hereby certify that the information provided is being done directly by myself or by me, as the legal guardian representing a minor, and that it is true and accurate to the best of my knowledge. I also understand and agree that incomplete or false information is grounds for denial of membership.

Participant's Signature (regardless of age): \_\_\_\_\_ Date signed: \_\_\_\_\_

If applicant is under 18 years of age:

Parent/Guardian's Name: \_\_\_\_\_ Parent/Guardian E-Mail: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

SIGNATURE REQUIRED

**REQUIRED FOR PARTICIPATION: Total of 4 signature(s) for Junior participant and parent – 2<sup>nd</sup> thru 4<sup>th</sup> signatures on 2<sup>nd</sup> page  
Total of 3 signature(s) for Adult participant—2<sup>nd</sup> and 3<sup>rd</sup> signature on 2<sup>nd</sup> page**

**USA VOLLEYBALL WAIVER AND RELEASE OF LIABILITY**

I acknowledge that volleyball or any sporting event is an extreme test of a person's physical and mental limits and that my participation in a volleyball event can cause potential death, serious injury, or property damage. With a full understanding of the potential risks, I HEREBY ASSUME THE RISKS OF PARTICIPATING OR OFFICIATING IN A VOLLEYBALL EVENT.

I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death or personal injury or damages of any kind, EXCEPT THAT WHICH IS THE RESULT OF GROSS NEGLIGENCE AND/OR WANTON MISCONDUCT OF PERSONS OR ENTITIES LISTED BELOW, which arise out of or relate to my traveling to and from or my participation in any volleyball event. THE FOLLOWING PERSONS OR ENTITIES: USA Volleyball and its Regional Volleyball Associations, tournament directors, sponsors, and the officers, directors, employees, representatives, and agents of any of the above; b) I AGREE NOT TO SUE any of the persons or entities listed above for any of the claims or liabilities that I have waived, released or discharged herein; and c) I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions.

Participant's Signature (regardless of age): \_\_\_\_\_ Date signed: \_\_\_\_\_

If applicant is under 18 years of age, a parent or guardian must execute, in addition to the foregoing Waiver and Release, the following, for and on behalf of the minor.

The undersigned parent and natural guardian or legal guardian of the applicant ( \_\_\_\_\_ [minor's name]) executes the foregoing Waiver and Release for and on behalf of the minor named herein. I hereby bind myself, the minor and all other assigns to the terms of the Waiver and Release. I represent that I have legal capacity and authority to act for and on behalf of the minor named herein, and I agree to indemnify and hold harmless the persons or entities named in the Waiver and Release for any claims or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the Waiver and Release. I fully consent to my child's participation in USAV/RVA events.

Parent/Guardian's Name (if registrant is under 18 years of age): \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

**USA VOLLEYBALL CODE OF CONDUCT**

**THE FOLLOWING ACTIONS ARE PROHIBITED:**

1. Violation of any anti-doping policies, protocols or procedures as defined by the International Olympic Committee (IOC; [www.olympic.org](http://www.olympic.org)), World Anti-Doping Agency (WADA; [www.wada-ama.org](http://www.wada-ama.org)), Federation Internationale de Volleyball (FIVB; [www.fivb.org](http://www.fivb.org)), US Anti-Doping Agency (USADA; [www.usada.org](http://www.usada.org)) or the United States Olympic Committee (USOC; [www.teamusa.org](http://www.teamusa.org)). Violations of this provision will be adjudicated only by USADA or the proper anti-doping authority, not USA Volleyball (USAV).
2. Violation of safe sport rules, policies and procedures promulgated by the U.S. Center for SafeSport ([www.safesport.org](http://www.safesport.org)), as they may be amended from time to time.
3. Possession, consumption or distribution of alcohol and/or tobacco if illegal or in violation of USAV or Regional Volleyball Association (RVA) policy.
4. USAV policy prohibits the possession, consumption or distribution of alcohol and/or tobacco by anyone registered as a junior volleyball player at the event venue of any USAV/RVA sanctioned junior event.
5. Use of a recognized identification card by anyone other than the individual described on the card.
6. Physical damage to a facility or theft of items from a room, dormitory, residence or other person. (Restitution will be part of any penalty imposed.)
7. Possession of fireworks, ammunition, firearms, or other weapons or any item or material which by commonly accepted practices and principles would be a hazard or harmful to other persons at USAV/RVA sanctioned events.
8. Any action considered to be an offense under Federal, State or local law ordinances.
9. Violation of the specific policies, regulations, and/or procedures of the USAV, RVA or the facility used in conjunction with a sanctioned event. (It is the responsibility of the individual to be familiar with applicable specific policies, regulations and procedures.)
10. Conduct which is inappropriate as determined by comparison to normally accepted behavior.
11. Physical or verbal intimidation of any individual.
12. Actions that will be detrimental to USAV or the RVA.

**USA VOLLEYBALL DISCIPLINARY POLICY:**

Infraction	When Occurred	Suggested Maximum Penalty
First	Before or during event	Individual disqualified (if person is a junior, he/she will be sent home as soon as possible and parent or guardian notified). The individual may be declared ineligible for USAV registration or RVA membership for one year starting from the date of infraction.
	After event concludes	The individual may be declared ineligible for USAV registration or RVA membership for one year starting from the date of infraction.
Second	Before or during event	Individual disqualified (if person is a junior, he/she will be sent home as soon as possible and parent or guardian notified). The individual may be declared ineligible for USAV registration or RVA membership for two years starting from the date of infraction.
	After event concludes	The individual may be declared ineligible for USAV registration or RVA membership for two years starting from the date of infraction.
Third		Individual may be declared ineligible for USAV registration or RVA membership for the remainder of his/her lifetime.
<b>NOTE:</b>		Major misbehavior (e.g. verbal or physical abuse of a child, sexual harassment, etc.) may subject the violator to a lifetime ineligibility for USAV registration or RVA membership after the first infraction.
Penalties are only applied after affording the participant due process as required by the Ted Stevens Olympic and Amateur Sports Act (TSOASA), USOC, USAV, and RVA. Appeals, other than for doping violations, may be made in accordance with procedures set forth in the bylaws and operating codes of USA Volleyball and the RVA as printed in the current <i>Official USA Volleyball Guide</i> and <i>RVA Handbook</i> , respectively.		

- I have read and understand the USA Volleyball Code of Conduct and Disciplinary Policies
- I agree and consent to abide by the USA Volleyball Code of Conduct and Disciplinary Policies and other region specific code of conducts and/or disciplinary policies.
- I understand that, if I violate the USAV and/or RVA Codes of Conduct, I might be subject to disciplinary action in accordance with USAV and/or RVA Disciplinary Policies.

Participant's Signature (regardless of age): \_\_\_\_\_ Date signed: \_\_\_\_\_

Parent/Guardian's Name (if registrant is under 18 years of age): \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

**SCVA Club Participation Agreement**

I agree that I will be affiliated with the above named club for the 2018/2019 sanctioned season, and that I am aware of the Junior Player Eligibility Requirements. I am aware that for a club to be eligible for regional competition the club and the individual must abide by the tryout dates and commitment dates established by the SCVA.

Participant's Signature (regardless of age): \_\_\_\_\_ Date signed: \_\_\_\_\_

Parent/Guardian's Name (if registrant is under 18 years of age): \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

SIGNATURE REQUIRED

SIGNATURE REQUIRED

SIGNATURE REQUIRED



## USAV YOUTH & JUNIOR VOLLEYBALL PLAYER MEDICAL RELEASE FORM

This **must be** completed - legibly - and signed in all areas by both the player and his/her parent or guardian. I understand and agree that this document will be kept in the possession of authorized adult team personnel and that reasonable care will be used to keep this information confidential. **By signing this form the participant affirms having read and agreed to the terms and conditions listed below.**

Club: \_\_\_\_\_ Team Name: \_\_\_\_\_  Male  Female

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_

**Primary Contact: Parent or Guardian**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City, State & Zip \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

**Secondary Contact:**  Parent/Guardian  Other \_\_\_\_\_

Name: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Primary Insurance Co \_\_\_\_\_ Primary Group/Policy # \_\_\_\_\_ / \_\_\_\_\_  
 Family Physician Name \_\_\_\_\_ Physician Phone \_\_\_\_\_

Please elaborate on any medical conditions of which we should be aware:

Please list any medications currently being taken:

In the past 24 months, have you been tested, diagnosed and/or treated for a concussion:  Yes  No  
 If yes, provide the date (months and year), who performed the testing/diagnosing/treatment and what was the outcome:

Please list any allergies:

If None, please write None.

Participant Signature \_\_\_\_\_ Date: \_\_\_\_\_  
(regardless of age):

Participant, \_\_\_\_\_, has my permission to participate in training, competition, events, activities and travel sponsored by USA Volleyball or any of its Regional Volleyball Associations (RVAs). I approve of the leaders who will be in charge of this program. I recognize that the leaders are serving to the best of their ability. I certify that the participant has full medical insurance with the company listed above. I understand and agree that this document will be kept in the possession of authorized adult team personnel and that reasonable care will be used to keep this information confidential. I agree to allow the authorized adult team personnel to release this information in the event of a medical emergency to a third party medical provider. I also certify to the best of my knowledge that the participant named hereon is physically fit to engage in the activities described above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Relationship to Participant: \_\_\_\_\_

If, during the course of my daughter's/son's activities in volleyball, she/he should become ill or sustain an injury, I hereby **authorize** you to obtain emergency medical/dental care. I will assume financial responsibility for the bills incurred through my insurance company.

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

or

**I do not authorize** emergency medical/dental care for my daughter/son.

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



### IndustryVBC Parent contract & commitment of support:

- Parents are never to discuss any playing time issues at tournaments, ever.
- Player to coach interaction is the first outlet for any player concerns, not parent coach interaction. Should parent coach interaction become necessary it must be through prearranged times and dates to discuss concerns.
- *Parents will refrain from distracting coaches and/or players during competition and practice. Meaning specifically NO coaching from the sidelines to anyone. Parents can be supportive and cheer and demand effort from every player! That is part of supporting the team. When parents start trying to give instruction such as where to stand, how to play a ball etc. that is considered coaching and is a distraction and detrimental to team success.*
- Parents acknowledge that for a successful team effort, only one person can be in charge, and for this team that person is the coach.
- **Parents acknowledge that the team coach is the primary contact in regards to training, practices and matches and that players are required to create and maintain a good player / coach line of communication. Players not parents should be reaching out to coaches for any in season needs such as additional training and team questions.**
- All parents will respect all coach's decisions. It is the best way to get the most out of the season. Give us and our coaches the opportunity to do our best. At the end of the season make a decision as to what you gain
- Parents agree to abide by all contracts, rules and guidelines outlined in any and all Industry contracts and/or paperwork
- **Parents acknowledge that the commitment to the club is also a financial commitment and regardless of whether or not their athlete can or does finish the competition season under any circumstances, they assume responsibility for completing all payments, and completing them in a timely manner.**
- Any difference of opinion that a parent may have with the coach will be discussed with the coach in a civil manner and at a time and place NOT in the presence of any team members.
- Anything that cannot be resolved to your mutual satisfaction will then be addressed to the Club Director, again, NOT in the presence of team members or other persons, and at a time mutually convenient.
- Any discussion about team or players will include only my daughter, her abilities and what she needs to do to achieve what we are looking for from our team and club. No comparisons to other players. And absolutely no blanket statements such as "we all feel this way" or "there are multiple people that feel this way". Speak for yourself only.
- **I will make every effort to see that my child abides by the pledge she signed.**
- This includes providing written / email notice in a timely manner, if my child cannot attend a practice or a tournament due to extenuating circumstances.
- **I will be supportive of my child's full participation with the Elite/Industry VBC including but not limited to attending all practices and tournaments, speaking only positively about coaches, players and program in regards to ours and others, healthy eating and sleeping habits, and following all club training guidelines and directives both inside the gym and out.**
- I will enthusiastically support the whole team and show good sportsmanship toward all members of this team and all members of opposing teams, at all times and under all circumstances.  
I recognize and accept that I am the adult, and that I set the tone for this behavior.
- I release all rights to any media taken before, during or after tryouts, clinics, practices or training including but not limited to photos and video understanding that it may be used for promotional or training purposes.
- I understand that all parent/staff, player/staff, and parent/player/staff meetings may be recorded for training purposes.
- I understand that all payments for the club season are due in full regardless of any extenuating circumstances.

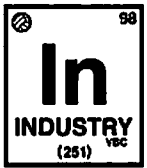
☺ I understand, accept and will abide by these goals, rules, and standards of conduct. I also understand that any non-compliance can be cause for parent and/or player suspension from the Industry Club. And that if suspended that does not release me from the financial obligation of completing all club payments in a timely manner as contracted.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

# INDUSTRY VOLLEYBALL CLUB

## PLAYER CONTRACT



### **Practice / Tournament Rules:**

- Players are required to attend every practice. Being sick is not a reason or excuse for missing practice
- Players acknowledge that while we operate in age groups we sometimes move players to teams which best suit the players ability and our club program
- Players must remain at the competition site until released by the coach
- Players are required to be at the gym at least 15 minutes prior to their scheduled practice time.
- Players must be completely prepared both mentally and physically (shoes, kneepads etc.) to begin practice at the scheduled start time.
- If a player must miss a practice an email at least 24 hours in advance to his Head Coach and the Club Director, is required.
- If a player must miss a practice unexpectedly, a phone call or text must be made to his Head Coach prior to the practice.
- A written / email notice is mandatory if a player cannot make a practice or tournament due to extenuating circumstances; this notice should be sent to his Head Coach and the Club Director.
- Players are expected to help set up, take down and take care of equipment at each practice.
- Players are to assist in accounting for volleyballs.
- All club and facility equipment must be properly cared for.
- **IF EQUIPMENT IS BROKEN OR LOST IT WILL BE BILLED TO THE TEAMS ON SITE AT THAT TIME**
- All players are required to participate in all physical conditioning activities and drills unless excused by a doctor or the coach.
- All players are expected to fulfill all outside training assignments.
- All players are required to receive permission from their Head Coach before leaving any tournament.
- All players 15 and older must maintain a minimum level of fitness, which can be determined by hydrostatic weighing and body weight. If body fat percentage increases by more than 2% or body weight increases by more than 5% this will be deemed non compliant and could result in your suspension from The Industry VBC.
- Players understand that their commitment to their team and club both physically and financially is a commitment for the entire club season regardless of any extenuating circumstances.

### **Players Standard of Conduct:**

- Decisions by the team coach are final, both at practice and for games & tournaments.
- These decisions apply to conduct, meetings, meals, and schedules while at tournaments.
- A serious difference of opinion may only be addressed at a later time, by contacting the Club Director
- A player must report all physical injuries or any illness to the coach.
- No derogatory or negative comments about players, coaches or clubs.
- NO Alcohol
- No Tobacco
- No drugs. Caffeine and all stimulants are considered drugs.
- Non-prescription and prescription drugs must be approved through the Head Coach and Club Director.
- Healthy eating and sleeping practices are to be a part of a daily routine.
- Healthy eating includes these stipulations: NO processed sugar NO fried food NO commercial soda
- Players must be on time for all team commitments.
- Players are expected to attend every tournament regardless of any extenuation circumstances
- All players will abide by the rules established for scrimmage and tournament facilities, both locally and in other cities.
- Only good sportsmanship conduct toward fellow players and toward opposing team players will be tolerated.
- I release all rights to any media taken before, during or after tryouts, clinics, practices or training including but not limited to photos and video understanding that it may be used for promotional or training purposes.

I understand, accept and will abide by these goals, rules, and standards of conduct. I understand that all player/coach, parent/coach and player/parent/coach meetings including team meetings may be recorded for training purposes. I also understand that any non-compliance can be cause for my playing status release from the Industry Club and that being suspended or released from playing status does not alter my financial obligation.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_