

SCVA Letter of Commitment – Junior Girls

DO NOT SIGN WITHOUT READING CAREFULLY. DO NOT SIGN PRIOR TO JULY 26, 2022 (15-18&UNDER AND ALL HIGH SCHOOL AGED PLAYERS) OR OCTOBER 4, 2022(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 2022/2023 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 JULY 26, 2022 (15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or OCTOBER 4, 2022(14&under) is subject to suspension for the entire season. A club representative may not ask a player to sign prior to JULY 26, 2022 (15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or OCTOBER 4, 2022(14&under) either.
 - b. A player may not sign a Letter of Commitment before JULY 26, 2022(15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or OCTOBER 4, 2022(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 July 26th (15-18&under) or OCTOBER 4th (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 JULY 26, 2022 (15-18&under) or OCTOBER 4, 2022(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 2022/2023 season.
2. Verbal Commitments. A player may commit verbally to a club prior to JULY 26, 2022 (15-18&under AND ALL HIGH SCHOOL AGED PLAYERS) or OCTOBER 4, 2022(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 18 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 2022/2023 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 for the entire 2022/2023 season. 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.

NOTE: IT IS A VIOLATION OF SCVA POLICY TO POST-DATE THIS DOCUMENT

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: Maria T. Fattal

Director's Signature:  Date: _____



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



SEAL BEACH VOLLEYBALL

2022/23 SEASON PLAYER & PARENT AGREEMENT

(please print legibly)

Welcome to Seal Beach Volleyball Club (the "Club"). We are excited that you have decided to join our Club and look forward to having you participate in the upcoming season. Our goal is to make your Club volleyball experience as enjoyable and as successful as possible, both on and off the court. Please read carefully the commitment details outlined below and sign at the bottom.

PLAYER INFORMATION

Player Name:

Team Age | Color:

2022/2023 SEASON FEES

Team Season Fee	\$	<input type="text"/>
Less Discounts, if applicable:		
\$100 Paid in Full	Less: \$	<input type="text"/>
\$100 Returning Player	Less: \$	<input type="text"/>
\$250 Sibling Discount (youngest family member only)	Less: \$	<input type="text"/>
Total Season Fee:	\$	<input type="text"/>

Parent agrees that Player will abide by all Club rules and attend the scheduled practices, workouts, matches and tournaments. By signing below, Parent agrees to pay the total fees indicated above. Since the Club needs to pay for various fixed expenses (such as facility fees, coaches, insurance etc.), the deposit is NON-REFUNDABLE but bi-monthly fees and tournament payments will be pro-rated if COVID 19 restrictions are mandated.

PREFERRED PAYMENT PLAN

Pay in Full or Monthly Installments

PREFERRED PAYMENT METHOD

Cash, Check or Installment made with Credit Card on Account
 Zelle Installments (Attach Credit Card Authorization Form)

PARENT SIGNATURE

I agree to pay the total fee due for the 2022/23 season according to the payment plan & method checked above:

Parent Signature:

Date:



SEAL BEACH VOLLEYBALL CLUB

(please print legibly)

2022/2023 CREDIT CARD AUTHORIZATION FORM

(Visa, MC, American Express & Discover Credit & Debit Cards Accepted)

Player's Name:	
Team (# and color):	
Parent Name:	
Card Type (Visa, MC, etc):	
Cardholder Name:	
Credit Card #:	
Expiration Date:	
CVV Code:	
Billing Address:	
Zip Code:	
Contact Phone #:	
Contact email address:	
Total Amount Authorized:	\$ _____
Pay in Full:	<input type="checkbox"/> Pay in Full
Installment Payments:	<input type="checkbox"/> Installment Payments <i>(per schedule in Club Information Packet)</i>
Other Charges:	<input type="checkbox"/> I also authorize SBVBC to charge my card for upcoming travel tournaments (dates & amounts TBD)
Authorized Signature	



SEAL BEACH VOLLEYBALL CLUB - UNIFORM ORDER FORM FOR THE 2022- 23 SEASON (revised 7/11/22)

Player's name: _____

Team name (age and color, such as "14-Black"): _____

Date of this order: _____

Parent's phone number: _____

Uniform jersey number choices (see instructions on the next line): _____

List your uniform number, if you are a returning player. If you are not a returning player, list your first 5 choices from 1 to 99, including two uncommon (high) numbers.

PLEASE READ THESE NOTES CAREFULLY **BEFORE** FILLING OUT THE FORM:

1. **Player's package include ASICS warmup jacket and pants, 2 uniform jerseys (3 if Travel Team), a pair of spandex, a player backpack, 3 practice t-shirts.**
2. For **EXTRA ITEMS** - make check payable to "SBVBC". Also accepted is cash.
3. **All prices include California sales tax.** Freight is included for bulk orders at the start of the season. For later orders, freight charges might be incurred.
4. When items are delivered, sign for each item in the right-hand column on this sheet.
5. Size samples for all items must be tried on before ordering anything, since sizing varies greatly from item to item. Player/parent is responsible for all sizes ordered.

Player Package	COLOR	SIZES (circle yours)	COMMENTS	QTY.	INITIAL RECEIVED		
Asics Hoody	Royal	S, M, L, XL, XXL	100% poly	1			
Asics Pants	Black	XS, S, M, L, XL, XXL	100% poly	1			
Asics Spin Serve Jersey	White	YM, YL, YXL, XS, S, M, L, XL, 2X	moisture management poly	1			
Asics Spin Serve Jersey (Long Sleeve)	Black	YM, YL, YXL, XS, S, M, L, XL, 2X	moisture management poly	1			
Asics 3" Court Short	Black	XXS, XS, S, M, L, XL, XXL	92% nylon, 8% spandex	1			
Asics Backpack	Royal	14" X 18" X 7 1/2" inches	to carry gear	1			
Practice T-shirt - Short Sleeve	Black/White/Blue	YM, YL, S, M, L, XL, XXL	Softstyle-100% ringspun cotton	3			
Extra Items	COLOR	SIZES (circle yours)	COMMENTS	PRICE	QTY.	TOTAL	RECEIVED
Asics 3" Court Short	Black	XXS, XS, S, M, L, XL, XXL	92% nylon, 8% spandex	\$25		\$	
Asics 4" Court Short	Black	XXS, XS, S, M, L, XL, XXL	92% nylon, 8% spandex	\$25		\$	
Practice shirts - Short Sleeve	Black	YM, YL, S, M, L, XL, XXL	Softstyle-100% ringspun cotton	\$10		\$	
Practice shirts - Short Sleeve	White	YM, YL, S, M, L, XL, XXL	Softstyle-100% ringspun cotton	\$10		\$	
Practice shirts - Short Sleeve	Heather Blue	YM, YL, S, M, L, XL, XXL	Softstyle-100% ringspun cotton	\$10		\$	
Warm Up Long Sleeve T-Shirt	Black	S, M, L, XL, 2XL	Heavy - 100% cotton preshrunk	\$15		\$	
1/2 Zip Champion Pull Over - Club Logo	Black	S, M, L, XL, 2XL	9oz 50% cotton/50% poly	\$35		\$	
Crew Sweatshirt - Club Logo	Black	YL, S, M, L, XL, XXL	Gildan Premium 75/25	\$25		\$	
Hoody - Club Logo	Black	YL, S, M, L, XL, XXL	Gildan Premium 75/25	\$30		\$	
Flannel Pajama Pants - Club Logo	Royal/White/Blk	XS, S, M, L, XL, XXL	100% Cotton	\$35		\$	
Mikasa U - 12 Ball - VUL500	White	MSRP \$49.99	Microfiber Cover	\$35		\$	
Mikasa Practice Ball - VQ2000	Royal/White/Blk	MSRP \$49.99	Composite Cover	\$35		\$	
Visor - Club Logo	Black	One Size	97% poly/3% spandex	\$15		\$	
Baseball Cap - TRUCKER - Club Logo	Black	One Size	Blend	\$10		\$	
				TOTAL ORDER		\$	

Date payment received by our club _____

Date delivery completed _____

Check # _____ or indicate cash and get receipt _____

Signature when order completely delivered _____

Special notes: