



CONTACT INFORMATION

2023-2024

XCELERATION TEAM

PLAYER:

LAST NAME _____ FIRST NAME _____

STREET ADDRESS _____

CITY _____ ZIP _____

HOME PHONE _____ PLAYER CELL _____

SCHOOL _____ GRADE _____ BIRTH DATE _____

PLAYER E-MAIL _____

PARENT1 Last Name _____ FIRST NAME _____

STREET ADDRESS _____

CITY _____ ZIP _____

HOME PHONE _____ PARENT1 CELL _____

PARENT1 E-MAIL _____

PARENT2 Last Name _____ FIRST NAME _____

STREET ADDRESS _____

CITY _____ ZIP _____

HOME PHONE _____ PARENT2 CELL _____

PARENT2 E-MAIL _____



COMMITMENT CONTRACT

By signing below, player and parent agree to the following with the Xceleration Volleyball Club:

1. The player commits to playing with Xceleration Volleyball Club
2. To pay all fees associated with the Club for dues per the schedule received on Signing Night. If the player chooses to leave the club during the season for any reason, the full season's fees remain the responsibility of the player and parents.
3. To pay all fees associated with the club for travel by the due dates. In the event that a player does not attend a travel tournament, they are still responsible for their share of the coaches and team costs. If air travel is involved, once ticketed the air fare is non-refundable.
4. No refunds can be given for dues or travel for any reason.
5. Accounts are delinquent five days after a payment due date and delinquent amounts will be assessed a \$250 late payment fee. An athlete may be prohibited from attending practices and from participating at tournaments while her family's account is delinquent.
6. A processing fee of \$35 will be charged for all returned checks.
7. To abide by all rules posted in the Xceleration Club Handbook.

TEAM: _____

Player Name (print): _____

Player Signature: _____

Parent Name (print): _____

Parent Signature: _____

Date:

Club Director Signature _____



WAIVER OF LIABILITY FOR GYM USE

Please read this provision carefully as it modifies and limits you and your children(s) rights.

I, the parent/guardian _____ of child _____ signing below, wish for myself and my child/children to utilize the services, facilities, property and equipment offered by Xceleration Volleyball Club. For and in consideration of my child's use of the NorCal Courts, its facilities and equipment located at or near 360 Ferry Street, Martinez, California commonly referred to as the Xceleration Sports Facility and other valuable considerations, the undersigned expressly agree to forever discharge, hold harmless, waive and release from liability Xceleration Volleyball Club, its members, managers, coaches, officers, agents, employees, insurers and Owners from any and all claims, demands, injuries, damages, actions, liabilities, causes of action and lawsuits for all acts of active and passive negligence to the fullest extent possible by law resulting from any accident or injury sustained by the child resulting from or connected with use of the gym, property, facilities or while engaging in an event, practice or camp at the gym, including coming to or going from said event. This waiver and release of liability applies to and includes, but is not limited to, physical injury, mental injury, emotional distress, death, and transmission of communicable diseases such as COVID-19 commonly referred to as the Coronavirus, property damage, economic and non-economic damages. I further agree to defend, indemnify and assume all expenses, costs, attorney's fees and losses arising from said injury or accident of said child(ren) and to hold Xceleration Volleyball Club, its members, managers, coaches, officers, agents, employees, insurers and Owners harmless and free of any and all liability.

By signing below both parents agree to the above

Participant's Name (Please Print): _____

Participant's Signature: _____ Date: _____

In case of emergency:

Contact Name: _____ Phone: _____

(Parent's signature if under 18 years of age) I represent that I have legal capacity and authorize to act on behalf of the minor named herein.

Parent/Guardian Signature

Date



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: Xceleration Volleyball 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



NCVA and JVA Membership Registrations

Our participation in the tournaments hosted by the Northern California Volleyball Association (NCVA) and the Junior Volleyball Association (JVA) requires annual memberships with the NCVA/USAV and JVA.

Memberships will be purchased online once purchase portals become available for the 2023-2024 season. Xceleration will share information and instructions on how to purchase memberships once the purchase portals become available, scheduled for September.

Uniform Sizing Information

This is for preliminary information or uniform sizing which is expected to be done at signing night. More information to come.

Name:

Team:

T-Shirt Size:

Jersey Size:

Spandex Size:

Warm-ups Size:

Jersey Number

First Choice:

Second Choice



2023-2024 Season Signing Package

DUES PAYMENT SCHEDULE & HOW TO PAY:

23-24 SEASON DUES

	CASH / CHECK					PAYPAL / CREDIT CARD (WITH TRANSACTION FEES)				
	1st Install (Due at Signing Night)	2nd Install	3rd Install	Club Dues Total	PAID IN FULL 5% Disc (Due at Signing Night)	1st Install (Due at Signing Night)	2nd Install	3rd Install	Club Dues Total	PAID IN FULL 5% Disc (Due at Signing Night)
12BLUE	\$1,200	\$900	\$900	\$3,000	\$2,850	\$1,242	\$931	\$931	\$3,104	\$2,949
13BLUE	\$2,252	\$1,689	\$1,689	\$5,630	\$5,349	\$2,331	\$1,748	\$1,748	\$5,827	\$5,535
13WHITE	\$2,044	\$1,533	\$1,533	\$5,110	\$4,855	\$2,115	\$1,587	\$1,587	\$5,289	\$5,024
14BLUE	\$2,296	\$1,722	\$1,722	\$5,740	\$5,453	\$2,376	\$1,782	\$1,782	\$5,940	\$5,643
14WHITE	\$2,296	\$1,722	\$1,722	\$5,740	\$5,453	\$2,376	\$1,782	\$1,782	\$5,940	\$5,643
15BLUE	\$2,632	\$1,974	\$1,974	\$6,580	\$6,251	\$2,724	\$2,043	\$2,043	\$6,810	\$6,469
15WHITE	\$2,296	\$1,722	\$1,722	\$5,740	\$5,453	\$2,376	\$1,782	\$1,782	\$5,940	\$5,643
16BLUE	\$2,632	\$1,974	\$1,974	\$6,580	\$6,251	\$2,724	\$2,043	\$2,043	\$6,810	\$6,469
16WHITE	\$2,464	\$1,848	\$1,848	\$6,160	\$5,852	\$2,550	\$1,912	\$1,912	\$6,374	\$6,056
17BLUE	\$2,632	\$1,974	\$1,974	\$6,580	\$6,251	\$2,724	\$2,043	\$2,043	\$6,810	\$6,469
17WHITE	\$2,464	\$1,848	\$1,848	\$6,160	\$5,852	\$2,550	\$1,912	\$1,912	\$6,374	\$6,056
18BLUE	\$2,632	\$1,974	\$1,974	\$6,580	\$6,251	\$2,724	\$2,043	\$2,043	\$6,810	\$6,469
18WHITE	\$2,464	\$1,848	\$1,848	\$6,160	\$5,852	\$2,550	\$1,912	\$1,912	\$6,374	\$6,056

OPTIONS FOR PAYING IN FULL:

- Cash or Check at signing night, August 3, 2023.
- PayPal - please visit the Online Store at www.xcelerationvbc.com on Aug. 3, 2023 (*regulations prohibit us from accepting payments prior to Aug. 3, 2023*)
- If using a credit or debit card account to pay in full at signing night, please complete the card authorization form below.

OPTIONS FOR PAYING BY INSTALLMENTS:

A card authorization form is required if paying in installments.

- For your convenience, we encourage that fees be paid by due dates via PayPal through our Online Store www.xcelerationvbc.com, or click [HERE](#)
- Pay by Credit/Debit Card: If you would like Xceleration VBC to charge an installment payment to the authorized account, please notify Gayle Swann at gayleswann@sbcglobal.net before each due date.

note 1: The second and third installment payment will be delinquent five days after each due date. The authorized card account will be charged for the delinquent amount plus a \$250 late payment fee. An athlete may be prohibited from joining practice and tournaments while her family's account is delinquent.

- Pay by Check: Have check or cash ready for first installment at signing night, Aug. 2, 2023 Send check for subsequent installments, allowing mailing time for delivery by due dates to:

Xceleration VBC
Attn: Gayle Swann
P.O Box 30132
Walnut Creek, CA 94598-9991



CREDIT CARD AUTHORIZATION FORM TO PAY IN FULL

**USE THIS FORM ONLY IF PAYING IN FULL WITH A DEBIT/CREDIT CARD
AT SIGNING NIGHT**

Please complete this form if paying in full with a credit / debit card at signing night, Aug. 3, 2022. For other payment options, please refer to Dues Payment Schedule above.

By signing below, I hereby give my permission to the Xceleration VBC to charge my credit card account for \$_____ representing full payment of '23 – '24 club dues for:

Athlete Name: _____

CREDIT CARD INFORMATION

Credit Card Type: ☐ VISA ☐ MASTERCARD

Card Number: _____

Exp (mm/yy) _____ Sec Code _____

Card Member's Name
(as it appears on the card): _____

Card Member's Billing Address: _____

Card Member's City, State, Zip: _____

E-Mail: _____

Phone: _____

Signature: _____ Date: _____



2023-2024 Season Signing Package

CREDIT CARD AUTHORIZATION FORM – REQUIRED IF PAYING DUES BY INSTALLMENTS

Athlete Name: _____
Team Name _____

By signing below, I hereby give my permission to the Xceleration VBC to charge my card account for the amounts detailed below .

Description	Due Date	Amount includes 3.49% transac. fee
1st Installment	Signing Night, 8/02/23	\$ _____
<input type="checkbox"/> Check here if you wish to charge 1st installment to authorized account		
2nd installment <i>see note 1</i>	September 15, 2023	
3rd Installment <i>see note 1</i>	October 15, 2023	

For other payment options please refer to Dues Payment Schedule page above.

If you would like Xceleration VBC to charge a 2nd or 3rd installment payment to the authorized card account, please notify Gayle Swann gayleswann@sbcglobal.net before each due date.

note 1 IMPORTANT: The second and third installment payment will be delinquent five days after each due date. The authorized card account will be charged for the delinquent amount plus a \$250 late payment fee. An athlete may be prohibited from joining practice and tournaments while her family's account is delinquent. The authorized account will be charged only if a required payment becomes delinquent.

CREDIT CARD INFORMATION

Credit Card Type: ☐ VISA ☐ MASTERCARD

Card Number: _____

Exp (mm/yy) _____ Sec Code _____

Card Member's Name
(as it appears on the card): _____

Card Member's Billing Address: _____

Card Member's City, State, Zip: _____

E-Mail: _____

Phone: _____

Signature: _____ Date: _____



CLUB DUES

Club dues include:

- Coaches' stipends, travel/lodging
- Club Equipment/Practice Facility and
- Operations
- Sports Psychology sessions
- Team Affiliation Fees
- All Tournament Entry Fees
- Uniform Package
- Club Insurance
- Misc. administrative expenses

Club dues do not include:

- Tournament travel expenses for the member athlete and her family
- If a team decides to join a tournament that is not included in the original schedule, additional tournament registration fees and coaches' travel costs for the optional tournament.
- Post-season expenses for qualifying tournaments (e.g., Junior National Championships): tournament entry fees, coaches' salaries, travel & lodging).
- JVA and NCVA/USAV membership fees for players

Payment Options:

Pay in full at signing night: 5% discount will be applied. Bring cash or check to signing night, Aug 2 2023. If using a debit/credit card, complete the card authorization form below. On Aug 2, 2023 payment can be completed using PayPal through our online store at www.xcelerationvbc.com. (*regulations prohibit us from accepting payments prior to Aug. 2, 2023*)

Pay in three installments. A card authorization form is required if paying in installments. The first installment is due on signing night; due dates for the second and third installment payments are listed in the following page. An installment payment will be delinquent five days after each due date. The authorized card account will be charged for the delinquent amount plus a \$250 late payment fee. An athlete may be prohibited from joining practice and tournaments while her family's account is delinquent

How to pay: Club Dues may be paid with cash/check or credit/debit card on signing night. If paying by installments, send checks by mail or, for your convenience, the club encourages payment through the Online Store via PayPal, or credit/debit card (plus 3.49% processing fee for PayPal or Card). A schedule of amounts due and due dates follows.



NCVA Letter of Commitment

2023.2024 Girls' Season – 18's, 17's, 16's, & 15's Only

FIRST DAY OF TRYOUTS MAY BE HELD ON OR AFTER JULY 28, 2023. DO NOT SIGN THIS BEFORE AUGUST 2, 2023.

DO NOT SIGN WITHOUT READING CAREFULLY OR WITHIN 48 HOURS AFTER ATTENDING A TRYOUT.

NOTE: IT IS A VIOLATION OF NCVA POLICY TO PRE-DATE THIS DOCUMENT

1. **This is the official Letter of Commitment for NCVA/USAV, all others will not be recognized or supported.**
 - a. This requirement has been created to protect the player and parent/guardian as a member of a club whom follows NCVA policies and guidelines.
2. **Basic Penalty.** I understand that by signing this letter I am committed to joining the club named within this document for the entire 2023-2024 season (September 1, 2023 – August 31, 2024). If I compete with another club, I may be subject to suspension for the remainder of the season.
 - a. **Early Signing Penalty.** A player who signs a Letter of Commitment can only do so after they receive an offer from that club.
 - b. **Under no conditions** may the Letter of Commitment **be pre-signed or pre-dated.**
 - c. **It is the responsibility of the Club to inform players' parent or legal guardian of deposit and refund policy in the Commitment Letter.**
 - d. **It is the responsibility of the parent/guardian to understand the club deposit and refund policy before signing.**
 - e. **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 2023-2024 season.
3. **Verbal Commitments.** Returning players may verbally commit after July 8, 2023. A verbal commitment is not binding. The player may revoke the commitment at any time, before signing this Letter of Commitment, without penalty.
4. **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 and if necessary, have the club I am committed to contact the NCVA for further assistance.
5. **Club Signatures Required Prior to Submission.** This document must be signed and dated by the Club Director before submission to me and my parents (or legal guardian) for our signatures.
6. **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.
7. **Falsification of Letter of Commitment.** If any part of this Letter of Commitment is falsified, including the date or any policy, the athlete and club understands that they are subject to suspension for the entire 2023-2024 season.
8. **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.
9. **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) leaves the team, I remain bound by the provisions of this document. If a club makes dramatic material changes from what was promised, then it may be grounds for a release from the commitment. Examples include, but are not limited, to significant changes in practice schedule, practice location, tournament schedule, cost, etc.

I certify that I have read all terms and conditions in this document, discussed them with the club representative named within, and I fully understand, accept, and agree to them:

Club Name: _____

Team Name: _____

Club Director: _____

Signature: _____

Date: _____

Player's Name: _____

Signature: _____

Date: _____

Address: _____

City: _____ State: _____

Zip: _____

Parent's Name: _____

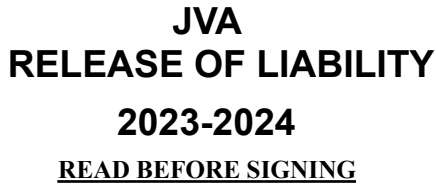
Signature: _____

Date: _____

Parent Phone #: _____

Parent Email: _____

Date: _____



Participant Name _____

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, BUT NOT GROSS NEGLIGENCE OF THE RELEASEES; or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE (JVA) Junior Volleyball Association, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (RELEASEES), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

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PLAYER COMMITMENT FORM

2023-2024 Club Season

ONLY SIGN ONCE ATHLETE HAS CONTRACTUALLY AGREED TO COMMIT TO ONE CLUB FOR THE FULL SEASON.

By signing below, I agree that I have read the club's Release Policy, Refund Policy, and Electronic/Social Media and Travel policies and that my child is committing to play for the following club for the 2023-2024 club volleyball season.

Athlete transfers/releases between clubs are only permitted with a written release from the club you have committed to using this form.

Once this document has been signed, the athlete is legally bound to this club for the duration of the 2023-2024 season. The season begins July 30, 2023 and continues through the GJNC, AAU Championships, or the club's last scheduled tournament, whichever is scheduled last.

Athlete Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____ Club Director Signature: _____

ATTENTION PARENTS: You are responsible for filling out the Player Commitment Form and providing a signed copy of this document to the club you select. Clubs will be required to have a copy of this form on file if requested by the WCVBA.

WCVBA—PO Box 322
Rocklin, CA 95677
www.wcvba.com

