# **OUTLAW VOLLEYBALL CLUB**

## ATHLETE/PARENT AGREEMENT

### Verti Max Training

ATHLETE'S FULL NAME						
ADDRESS			(	CITY		
STATE	ZIP	SCHOOL _		GRAD YR		
PLAYER EMAIL			Birthdate	Position		
MOM		EMAIL				
DAD		EMAIL				

#### TEAM - VERTI MAX

I \_\_\_\_\_\_, agree to the following standards, expectations, and

guidelines as an athlete and member of the OUTLAW VOLLEYBALL CLUB:

- Athlete is expected to be at all practices according to set schedule.
- An appropriate notification is given to designated Outlaw representative if athlete is ill or must miss practice for approved reasons.
- A strong work ethic is expected.
- Good Sportsmanship is expected at all times by all athletes, either on the court or on the sidelines.
- Athlete is expected to use good judgment regarding personal care.
- OVC is not responsible for loss or damage of athlete's personal property.
- Cost is \$250. Payments can be made online via the Donations tab on the website at www.outlawvolleyball.org
- Facebook discount code \_\_\_\_\_\_.

Athlete Signature

Date

#### Parent/Guardian Signature

Date