

High Performance Volleyball Academy LLC

I. Code of Conduct

The appropriate conduct of High Performance Volleyball Academy (HPVBA) players, coaches, Board Members, parents, and all persons directly or indirectly associated is essential for a safe, healthy and productive environment.

The following actions are prohibited at any tournament, travel event or practice. The policies apply to conduct, both on or off the court and will carry progressive disciplinary action up to and including removal for the club.

- Possession or use of any alcoholic substance or tobacco product or any other substance banned by HPVBA or USAV.
- Possession or use of ANY over-the counter medication or prescription drug of any kind without the knowledge of the team coach and team mom.
- Physical damage to any HPVBA property or any facility.
- Theft of personal or public property.
- Use of a recognized identification card by anyone other than the individual described on the card.
- Violation of the specific policies, regulations, and /or procedures of USAV, or facility used in conjunction with a sanctioned event. It is responsibility of all persons associated with HPVBA to be familiar with applicable specific policies, regulations and procedures.
- Illegal transport, illegal possession, or use of illegal drugs or other substances banned by HPVBA or USAV.
- Possession of fireworks, ammunition, firearms, or other weapons or any item or material which by commonly accepted practices and principles will be hazard or harmful to other persons.
- Providing any over the counter or prescription medication, legal or illegal drug, alcohol, tobacco, or any banned substance to another individual (knowingly or unknowingly).
- Any action to be considered to be offense under Federal, State or local law ordinances.
- Conduct, which is inappropriate as determined by comparison to normally, accepted behavior.
- Verbal intimidation of or physical harm to any individual during a sanctioned tournament, travel event or practice.

Athlete's Name _____

II. Athlete Contract

I understand and agree with The High Performance Volleyball Academy (HPVBA) that to become the best player I can be, I must make my main goal to be responsible for my behavior and works ethic. To do so I am fully committed to HPVBA and therefore will;

- **Conduct** myself in a manner to bring credit and prestige to my self and the program.
- **Budget** my time to meet all responsibilities of work, learning and other personal areas
- **Attend** every possible practice, match and team function including scoring and referee clinics. If I am unable to attend, I will personally notify my coach.
- **Be ready** for practice (15 minutes early)
- **Pursue** mental and physical conditioning out side of practice.
- **Communicate**, both on and off the court with my teammates and coaches for mutual understanding.
- **Discipline** my body, including adequate sleep, a healthy diet, and ABSTAIN from alcohol, tobacco and illegal drugs.
- **Recognize** the unique aspects of volleyball, yet learn from my mistakes and never make excuses or lay blame.
- **Accept**, all coaching comments and assignments only as ways in which the team and myself might improve.
- **Ignore** errors of my teammates, as I believe no one is trying to make mistakes.
- **Support** the full effort and good skills my teammates exhibit.
- Perform with full effort and intensity to the best of my abilities in all training and competition.
- **Concentrate**, never cause distractions, or worry about worrying.
- **Clean** our tournament area or practice facilities of all trash, Leave the area as we found it, if not BETTER.
- **Realize** that the team is made up of individuals and everyone cannot start. Accept my role on the team and what it takes to be the best.
- Under age athletes are encouraged to discuss any issues with their parents/guardian, however parents/guardian will address any complaints to the members of the administration staff and NOT to the coaches or any member of the coaching staff. (Apply to adult league)
- Players understand that their membership to the HPVBA will last for 14 months and begins with the date of this agreement.
- **Transfer** to another program will be requested in writing and will be monitored by GEVA/USVA rules and procedures (HPVBA reserves 21 days to submit transfers to USVA/GEVA).

Any athlete found in possession of alcohol, tobacco, illegal drugs or engaged in inappropriate or unlawful behavior will be immediately suspended from the program and be released to the custody of their parent(s) and, in the event of an athlete that is not accompanied by their parent(s) or legal guardian, they will be sent home at the expense of the parent(s) o guardian.

III. Escalation & Due Process

Escalation Procedure - Players

If any player has complaint or concern, is expected to speak directly with their team coach to try to resolve the issue. If, after failing to resolve the issue, a player would like further consideration, they should then contact the Club Director. If the issue is still not resolved satisfactorily, they may take it before the Review Board. The decision of the Review Board is final. Playing time issues will not be considered by the Review Board.

Escalation Procedure - Parents

If any parent has complaint or concern, is expected to speak directly with the Club Director. If the issue is still not resolved satisfactorily, they may take it before the Review Board. The decision of the Review Board is final. Playing time issues will not be considered by the Review Board.

Escalation Procedure – Coaches

If any Coach has complaint or concern, is expected to speak directly with the Director of Operations or Club Director as appropriate. If the issue is still not satisfactorily resolved, they may take it before the Review Board.

Due Process

The Review Board shall be comprised of three Board Members. The request for hearing must be made in writing to the Club Director or Director of Operation within 7 days of receiving a decision by the Club Director.

Parent/Guardian Print Name

Parent/Guardian Signature

Date

Athlete Print Name

Athlete Signature

Date

IV. Athlete Travel Contract

WE TRAVEL TO TOURNAMENTS TO COMPETE; everything else is secondary.

- Under Age athletes **MAY NOT** drive to any event out side practice facilities.
- Athletes will leave cell phones at home. In the event of any emergency, parents can be provided with a list of adult cell phone numbers at the event.
- Athletes will be courteous to and respectfully obey all staff members. This includes chaperones and/or other adults traveling with the team.
- Athletes may not leave the hotel area at any time without permission from their coach or chaperone.
- Athletes must report any illness or injury to the coach and chaperone immediately.
- An athlete who damages any property at lodging or playing facility will be personally responsible for damages.
- No member of the opposite gender is permitted in team rooms.
- Athletes are not permitted in rooms with members of the opposite gender or significant others.
- Athletes must remain quiet at all times in lobby, dining area, hallways and rooms so other guests are not disturbed.
- Athletes after arriving to the hotel are not allowed out of their rooms after 10:00 p.m.
- Lights must be off by 11:00 p.m. This includes television, computers or any other device that might keep you or your roommates awake.
- Only one athlete at a time is permitted in the hotel's business center

Any action that fails to comply with the stated travel contract will result in temporary suspension of play

V. Waiver of Release to publish pictures of videos Agreement

- I give my permission to The High Performance Volleyball Academy LLC to use my child's picture or likeness, which may be taken at any activity or event, for use in advertising, promotional materials, website displays, or publications.
- I understand that The High Performance Volleyball Academy personnel, staff, members or other people might take pictures and or videos.
- I understand that this videos or pictures could be published by The High Performance Volleyball Academy at their website or by other entities.
- I understand that in some cases, a picture taken in any sports event might include me or anyone on my family or custody as part of the picture.
- I agree, consent, and authorize The High Performance Volleyball Academy to utilize these pictures or videos taken during practice, games, tournaments or any other event in their website or to be published as part of their advertising.
- I agree that no compensation will be requested by me for this pictures or videos as part of my agreement to join The High Performance Volleyball Academy.
- My signature releases, waives, discharges and absolves The High Performance Volleyball Academy from any responsibility pertaining to the aforementioned.
- I, the undersigned, have read the above waiver, release and understand it. I also understand that I have signed this document voluntarily, intelligently and with full knowledge of its legal consequences as the guardian for: _____ .

Parent/Guardian Signature

Date

Athlete's Signature

Date

VI. Consent to Treat

- By signing below, I consent for, _____ to receive any available treatment (Under the “Good Samaritan Statutes”) from any staff at the sites where competitions are held including any of the following; coach, school/team physicians, nurses, athletic trainers, and coaches/security certified in CPR/First Aid.
- My signature Releases, Waives, Discharges High Performance Volleyball Academy or it affiliates from any responsibility pertaining to the aforementioned.
- I, the undersigned, have read the above waiver, release and understand it. I also understand that I have signed this document voluntarily, intelligently and with full knowledge of its legal consequences as the guardian for _____.

[A copy of the athlete’s current physical (within the last year) which includes a physician’s clearance to participate, must be included with this form]

Emergency Contacts

Please provide the names and phone numbers of persons to contact in the event of an emergency. A guardian’s name and number must be listed for a minor. This also gives consent for information to be shared with the listed persons.

Name: _____

Name: _____

Phone:(h) _____

Phone:(h) _____

Phone:(c) _____

Phone: (c) _____

Relationship:

Relationship:

Parent/Guardian Signature

Date

Athlete Signature

Date

VII. Parent Contract

I have given permission for my child to participate in High Performance Volleyball Academy. We have discussed the risks, commitments and sacrifices involved and are committed to the success of the program. I understand and accept the financial obligations of participating with the following in mine:

The \$65.00 registration fee (\$35.00 USVA processing fee, \$30 HPVBA tryouts and membership) is non refundable, even if we choose not to participate in any one of the programs.

Team selections are made by a group of coaches. Therefore, I trust their judgment and will support my child, the program and the team selection.

Once selected for a program or a team, a statement will be mailed or handed at the practice's site to each team member for his or her individual non-refundable team dues.

(Included in these fees are: uniforms -excluding bags, sneakers and warm ups-, practice facilities/equipment, coaches' education/honorarium, USA Volleyball membership (for those playing on 13 year old teams and older), and program administration.)

Only CERTIFIED COACHING STAFF will offer all Programs

	Jr. Champs Program Cost/hour of Training \$8	Jr. Club Program Cost/hour of Training 12.50	Special Value (10 CCC's Included) Cost/hour of Training \$5
Boys(72 Sessions)	\$1700	\$1200	\$1900
Girls(87 Sessions)	\$1900	\$1250	\$2100

Includes:

PlyoCity Plyometrics Included – (3) One our workouts a week. (\$720 Value)

Practice Time - (3) Two hour Volleyball training practices a week.

Skill Development Drills.

Game Systems Knowledge.

Uniforms

Local, Regional, and National Tournaments Sanctioned by USVA/GEVA, Require Traveling (**This service is based on age, skill level, and program registration**)

AAU (Amateurs Athletic Union) Registration

GEVA (Garden Empire Volleyball Association) Registration

USVA (United States Volleyball Association) Membership

USVA Certifications (R-2 and Score keeping)

- In case of travel, players are responsible for sharing all team expenses (coaches' expenses are considered a team expense), regardless of whether or not the individual participated in a particular event. If individual fees, such as airfare, are not incurred by HPVBA, the player shall not be charged that amount.
- Players who are not in good financial standing will NOT be permitted to participate in team practices or attend tournaments and you will also be responsible for any fees incurred through a third party collection agency.
- Travel team parents may be asked to submit checks in advance or supply a credit card authorization for payment.
- As a parent, I agree to always show proper sportsmanship.
- I agree to provide transportation (if requested by a teammate) to at least expense), regardless of whether or not the individual participated in a particular event. If individual fees, such as airfare, are not incurred by HPVBA, the player shall not be charged that one tournament.
- The coach must be notified within two weeks of the distribution of the team's playing schedule of any non-emergency conflicts.

MAKE CHECKS PAYABLE TO:

High Performance Volleyball Academy, (HPVBA)
1245 Airport Rd. Ste.1 Lakewood, NJ 08701

VIII. Refund Policy

Satisfying our athletes by meeting all expectations is a business philosophy that we respect, practice, and emphasize in our program.

- To request a refund, You will need to submit a written request stating the reason for your request and within the first 10 days after the signing of our contract.
- This can be done by contacting our service department at finance@hpvba.com, in person at our office or by sending a fax 732-415-1324.
- NO refunds of any type will be accepted without a written request.
- HPVBA reserves the right to refund based on medical conditions and special circumstances, ONLY after a careful evaluation of each case has been done. IF approved, refund will be effective 30 days after we have received the written request by the member.

Parent/Guardian Print Name

Parent/Guardian Signature

Date

Athlete Print Name

Athlete's Signature

Date

Any question please contact us at
admin@hpvba.com or call telephone: 732-415-1370
Visit our web site www.HPVBA.com
High Performance Volleyball Academy 1245 Airport Rd, Ste 1 Lakewood, NJ 08701