



2020 Mini Club Forms

Player Name _____

The attached forms must be completed in BLACK INK and signed where applicable. Make sure to read each form carefully. Most forms require signatures from a parent and the athlete.

Check-off List:

- | | | |
|--------------------------|--|--------------------------------|
| <input type="checkbox"/> | 2020-21 Athlete Information Form | MC Form 1 |
| <input type="checkbox"/> | Athletic Code | MC Form 2 |
| <input type="checkbox"/> | Mini Club Agreement | MC Form 3 |
| <input type="checkbox"/> | Injuries, Damages or Losses Agreement | MC Form 4 |
| <input type="checkbox"/> | Photo/Live Stream Release | MC Form 5 |
| <input type="checkbox"/> | COVID-19 Waiver | MC Form 6 |
| <input type="checkbox"/> | USAV Medical Release (Must be notarized) Sept 1, 2020 | |
| <input type="checkbox"/> | Copy of Birth Certificate | |
| <input type="checkbox"/> | Copy of AAU Membership | Enter club code: WYD8AW |
| <input type="checkbox"/> | Deposit Check \$50 and Payment \$400 | |
| | *Payable to Gulf Coast Jrs* | |



MC FORM 1 - 2020-21 ATHLETE INFORMATION

Player's Name _____ Birthdate ___/___/___ Age _____

Address: _____ City _____ Zip _____

Cell # _____ Player's Email Address: _____

School: _____ Grade _____ High School Graduation Year _____

Height: ___ ft. ___ in. R or L Handed _____ Positions Played _____ Years played _____

Last season's jersey # _____ (if returning) If available: GPA _____ ACT _____ SAT _____

USAV Membership # _____ AAU Membership# _____

Important When registering for AAU & USAV, please select Gulf Coast Jrs as your club. **AAU club code: WYB977**

Do you have any medical issues? Y N Allergies: Y N If Yes, please describe: _____

Mother's Information:

Mother's Name _____ Email _____

Address if different from player: _____

Cell phone _____ Work _____ Include in group emails? Yes or No

Father's Information:

Father's Name _____ Email _____

Address if different from player: _____

Work _____ Cell _____ Include in group emails? Yes or No

Party responsible for payment: _____ Relationship _____

Would you like to be a sponsor? Yes or No Would you like to be a team parent or food parent? Yes or No _____

Comment: _____



MC FORM 2 - ATHLETIC CODE

Participation in this program is a privilege and should be approached by the athletes, coaches, and parents as such. Each participant represents Gulf Coast Jrs and should reflect good sportsmanship in their actions on and off the court.

Below are a list of code of conducts every athlete and parent(s) must follow:

- Athletes are prohibited from having any of the following items in their possession at anytime: alcoholic beverages, any tobacco products or smoking materials, e-cigarettes, inhalants, prescription or non-prescription drugs of any type, or any other type of illegal drug or substance. *IF A PLAYER IS FOUND TO BE IN POSSESSION OF ANY BANNED SUBSTANCE, HER MEMBERSHIP IN GULF COAST JUNIORS VOLLEYBALL CLUB WILL BE TERMINATED IMMEDIATELY.*
- Players, coach or parents should not make any disparaging remarks about, or gestures towards, another player, team, coach or official during or between matches.
- If a player is aware of another player(s) being in possession of a banned substance or violating any of our rules, she **MUST** tell a coach or parent immediately. Failing to do so will result in disciplinary action.
- For safety reasons, we require that all participants account for their whereabouts at all times and they should never go anywhere by themselves. There are NO EXCEPTIONS to this rule.
- Players MUST reflect good sportsmanship on and off the court.
- Members and parents are expected to act appropriately and dress tastefully, keeping in mind that they are representing Gulf Coast Jrs and our community.
- When participating in a tournament, players and coaches should not leave personal or team property unattended.
- Players and parents are responsible for leaving all facilities neat and clean. No coolers, food or drinks will be allowed in any gymnasium, regardless of what other teams or parents are doing.
- Players and parents should have a general knowledge of the USAV, the State High School program, and the Florida Region rules and regulations.

These restrictions may seem obvious, but we wish to have as many questions clarified BEFORE a problem develops. We reserve the right to add rules as situations demand.

We have read all of the expectations for the participant and parents and we agree to abide by all of the rules.

Parent/Guardian Signature _____ Date _____

Athlete's Signature _____ Date _____



MC FORM 3 - Mini Club AGREEMENT

The undersigned player and parent/guardian, hereafter designated as member, agree to accept membership in the Gulf Coast Jrs Volleyball Club for the 2020 mini club season. Membership entitles the member to participate in 2 practices per week and 1 or 2 local tournaments designated by the Club. Equal opportunity to participate will be provided during practice; however, on-court time at tournaments is not guaranteed, and is determined by the Club coaching staff. Tuition payment must be made upon roster placement. If the payment is not received, the player will not be allowed to continue practices or play in tournaments.

The total annual tuition includes: the non-refundable registration fee, Club operating expenses, practice shirt, team jersey, tournament entry fees and all coach's costs. If a team determines that they want to play in an additional tournament(s), the cost of the tournament(s) would be divided among the team members. Players pay for their food & personal items. USAV registration fee and AAU registration fee are not included in the annual tuition. Parents provide transportation to all practices and tournaments.

We, the parents/guardians of _____ (player's name) have read the information concerning the policies and practices of the Gulf Coast Jrs Volleyball Club (hereafter called the "Club"). We agree to allow her to join the Club for the 2020 mini club season. We understand that we are responsible for Club fees and player expenses, plus transportation to practices and all tournaments.

Skill Assessments will be held on Thursday, August 13, 2020 to determine the skill level of each player in order to place her on the appropriate team. All girls, who register, will be welcomed into our Club. If there are not enough girls in your age group for a team, we will do our best to put you on a team; however, you may have to play in an older age group. Our goal is to teach your athlete the game of volleyball and for the parents and the player to become part of our great volleyball family.

Playing on a travel team is optional and separate from mini club. Maintaining membership on a specific team will be at the discretion of the Club Director. Team assignments can be changed and are dependent upon the development of the individual player including her commitment, attitude, her ability to be coached, behavior, etc.

We have read the material provided and understand the time commitment involved in practice and competition. We have reviewed the Membership Agreement, "24 Hour Rule" Policy and understand that payment must be made in full on the day of placement.

SIGNATURE _____
(Parent/Guardian)

Date _____

As the player, I understand the commitment I am making to the Club and I am willing to commit myself to the program and my teammates for the 2020 mini club season.

SIGNATURE _____
(Player)

Date _____



MC FORM 4 - INJURIES, DAMAGES, OR LOSSES

By using the facilities provided by the Gulf Coast Jrs Volleyball Club, *referred to hereafter as the Club*, the member expressly agrees that the Club shall not be liable for any damages arising from personal injuries sustained by the member or her guest(s) in, on or about the premises of the said facilities and further agrees the Club shall not be liable for any loss or theft of personal property. Members assume full responsibility for any injuries, damages or losses which may occur to the member or guest, in or about the premises of said facilities and does hereby fully and forever release and discharge the Club, owner, employees and agent from any and all claims, demands, damages, rights of action, or causes of action, present or future, whether the same be known or unknown, anticipated, or unanticipated, resulting from or arising out of the members or guests use or intended use of the said facilities or the facilities and equipment thereof provided, however, that nothing contained shall release or discharge the Club from its negligence or the negligence of employees, or officer.

Member warrants, represents and agrees that the member is in good physical condition and that she has no disability, impairment or ailment that prevents her from engaging in active or passive exercise that will be detrimental and inimical to her health, safety, comfort or physical condition if she does so engage or participate. It is recommended that everyone consult their own physician before beginning any exercise program. Members shall not be relieved of their obligations to make any payment herein agreed to and no deduction or allowance from said payments shall be made, by reason of the absence or withdrawal of the member from membership or by reason of the member's failure to attend or use the facility.

The undersigned has received, read, understands and agrees to abide by and cause family members and guests to abide by the rules and regulations of the Club, as they now exist, and, as they may from time to time be amended or supplemented.

This agreement is not assignable or transferable by the member without the specific agreement and approval of the Club. Due to the fact that damages under this agreement are difficult to ascertain, the parties mutually agree that in the event of a default, the Club is entitled to receive the entire contract balance due as liquidated damages, plus all delinquency fees as prefaced herein. This agreement, together with any attachment(s) will be governed by the laws of Florida, supercedes all prior oral or written representations or communications between the parties, constitutes the entire understanding of the parties regarding the subject matter of this agreement, and may only be modified or amended by a written supplement signed by both parties.

Read, acknowledged, and agreed to this date, _____, 20____

Signature: _____ Driver's License # _____
(Parent/Guardian)

Signature: _____
(Player)



MC FORM 5- ATHLETE PHOTO/LIVE STREAM RELEASE FORM

I, _____, the parent or legal guardian of
_____ [Athlete] grant Gulf Coast Jrs Volleyball Club permission to use
photographs and/or videos taken during team practice, tournaments or other team events or any legal use, including but not
limited to: publicity, copyright purposes, illustration, training, advertising, recruiting, social media and web content.
Furthermore, I consent that such photographs and or videos shall be the property of Gulf Coast Jrs, which has the right to
duplicate, reproduce and make other uses as Gulf Coast Jrs deems necessary.

I understand that practices and/or tournaments may be streamed live (Facebook or other live stream app) and/or recorded
for recruiting purposes. The player and spectators will be recorded during these events.

Furthermore, I understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's Signature: _____ Date _____

Parent/Guardian's Printed Name: _____

Player's Name: _____

Phone Number: _____



Assumption of the Risk & Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

GULF COAST JRS VOLLEYBALL CLUB has put in place preventative measures to reduce the spread of COVID-19; however, **GULF COAST JRS VOLLEYBALL CLUB** cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending ANY 2020 LESSONS, CAMPS, CLINICS OR CLUB TEAM ACTIVITIES, indoor or outdoor, could increase your risk and child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending lessons, camps or clinics, club team activities, indoor or outdoor, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 while attending lessons, camps, clinics or club team activities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, the **GULF COAST JRS VOLLEYBALL CLUB** coaches, employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance during lessons, camps, clinics or club team activities participation in any **GULF COAST JRS VOLLEYBALL CLUB** programming ("Claims"). On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless the **GULF COAST JRS VOLLEYBALL CLUB**, its coaches, employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the **GULF COAST JRS VOLLEYBALL CLUB**, its coaches, employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any lesson, camp, clinic or club team activities, indoor or beach.

Name of Participant(s) _____

Signature of Parent/Guardian: _____

Date: ___/___/___

Print Name of Parent/Guardian: _____

Accepted by Gulf Coast Jrs Volleyball Club Representative: _____

Date: ___/___/___