

2024 Club Information Packet

Player Info

First Name:	Name: Last Name:				
Current Age: Tryout Age (as o	Tryout Age (as of July 1st, 2024): Date of Birth:				
Home Address:		City:		Zip:	
Grade: School Name:	High School Grad Year:				
imary position:Secondary position: Left or Right Handed				ed	
Prior Club Experience: Yes or No	Last Seas	on Club Name &	Team:		
Pare	nt(s)/ Guai	dian(s) Inform	ation		
First Name:	Last Name:		Relationship:		
Cell Number:	Email:				
Occupation:	Home Address:				
First Name:	Last Name:	Last Name: Relationship:			
Cell Number:	Email:				
Occupation:	Home Address:				
Players 15 and Older Only:					
Interested in playing in college:	yes	no			
If yes, level(s) of college interested in:	NCAA D1	NCAA D2	NCAA D3	NAIA	NJCAA
Have you started your recruiting proce	ess: yes	no			
Are you on a recruiting website: ye	s no	If yes, which or	ne:		
Staff Use Only (below)					
BC: AAU #		USAV#			
Additional Comments:					



VEVA Guidelines

- ✓ Athletes are expected to be committed to the program and to be respectful of their coaches and teammates at all times.
- ✓ Athletes are responsible for notifying coaches of any upcoming missed practice, team event, or tournament.
- ✓ Parents & athletes will notify their coach of any conflicts with the tournament schedule at the original parent meeting prior to practices starting.
- ✓ No athlete, parent, or coach shall make any disparaging remarks about, or gesture toward another player, team, coach, or official. This includes any and all social media outlets.
- ✓ VEVA has a "no tolerance policy" for alcohol consumption, smoking, vaping or drug abuse.
- ✓ VEVA will also not tolerate any bullying or discrimination.
- ✓ Athletes are responsible for leaving the gym area clean.
- ✓ Athletes will not make any derogatory posts of any other player or coach on social media nor will they post any pictures of other players without the players' permission if the picture is of a questionable nature.
- ✓ Athletes are required to bring a water bottle to every practice.
- ✓ When at tournaments athletes will wear shorts/pants over spandex when entering and leaving facility.

l,	, (athlete) have read and understand the above guidelines. I agree that any
violation of these clu	ub codes may cause expulsion from my team with no refund of club dues paid.
	(Signature of Athlete)
l,	(name of parent/guardian) have read and understand the above guidelines I
agree that any violat	tion of these club codes may cause expulsion from the club with no refund of club
dues naid	(Signature of Parent/Guardian)



Players Name:	Date of Birth:	Grade:
Parent(s) Name:		
Phone Number(s):		
Parent Email(s):		
Waiver of Liability:		
By signing below, I accept ful any and all apparatus, appliar whatsoever, owned, and ope hold this Club, its shareholde representatives, and agents hinjury, damage, or liability or therefrom.	nce, facility privilege, or se rated by this club at her o rs, directors, officers, emp narmless from any and all	ervice wn risk and shall bloyees, loss, claim,
My signature below signifies aforementioned. My signature at Vero Elite Volleyball Acade	re covers today and all fut	•
Parent/Guardian Signature:		Date: