

Welcome to the LHVA Information Meeting for the 2022-2023 Season

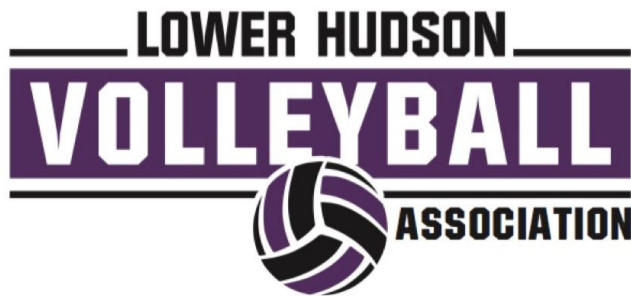
The Meeting will start in :



2:00

Email:

info@lhvavolleyball.com



Website:

www.lhvavolleyball.com



2022-2023 Coaches

Team	Email	Team
Chris Cabrey	ccabrey13@gmail.com	Additional Regional Team Head Coach
Nora Fernandez	nori67fd@gmail.com	Additional Regional Team Assistant Coach
Jojo Fernandez	jjfernandez91@gmail.com	15 White Co-Coach
Blaine Fitzgerald	blainewfitz@aol.com	17 Purple & 16 Black Assistant Coach
James Horan	horan.james2@gmail.com	16 Purple, 15 Black & 13 Black Head Coach 14 Purple Co-Coach
Angie LeCours-Cifone	ang.cifone@gmail.com	13 Black Assistant Coach
Chrissy McCarthy	chrissy.mccarthy4@aol.com	15 Black Assistant Coach
Leslie Morales	lesliemorales9@gmail.com	15 White Co-Coach & 13 Purple Assistant Coach
Melissa Noriega	meli98noriega@gmail.com	15 Purple Assistant Coach
Beth Pirrone	bethpirrone@gmail.com	17 Purple, 16 Black & 13 Purple Head Coach
Anthony Pirrone	anthonypirrone@aol.com	15 Purple & 14 Black Head Coach
Joseph Teves	josephteves0825@gmail.com	17 Black & 14 Black Assistant Coach
Doug Zani	Douglas@totalformfitness.com	17 Black Head Coach
Mariel Zavala	Marielzavala.95@gmail.com	16 Purple Assistant Coach 14 Purple Co-Coach



2022-2023 Teams & Programs

****12 Teams****

<i>Travel and Regional Girls Teams</i>	<i>Geva Age Guidelines- Born Between:</i>
<i>17U Travel & Regional</i>	<i>7/1/05 - 6/30/06</i>
<i>16U Travel & Regional</i>	<i>7/1/06 - 6/30/07</i>
<i>15U Travel & 2 Regional</i>	<i>7/1/07 - 6/30/08</i>
<i>14U Regional (2)</i>	<i>7/1/08 - 6/30/09</i>
<i>13U Regional (2)</i>	<i>7/1/09 - 6/30/11</i>
<i>*1 Additional Regional Team at Age Group Needed*</i>	

Winter Developmental Program (Grades 1-8)
LHVA/ WVBNY Summer Juniors Beach & Grass Programs



GEVA AGE GUIDELINES

USAV VOLLEYBALL JUNIOR PLAYER AGE DEFINITION

For use during the 2022-2023 Season

To determine the correct age division, please find the Month of Birth in the left column and then the year of birth in the same row. The heading of the column matching the Year of Birth is the correct age bracket.

	18 & Under ¹	18 & Under ²	17 & Under	16 & Under	15 & Under ³	14 & Under ⁴	13 & Under ⁴	12 & Under	11 & Under	10 & Under	9 & Under	8 & Under
July	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Aug	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Sept	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Oct	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Nov	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Dec	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Jan	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Feb	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Mar	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Apr	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
May	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
June	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015

¹Players who were born on or after July 1, 2004 OR players who were born on or after July 1, 2003 and a high school student in the twelfth (12th) grade or below during some part of the current academic year

²**Female Only** - Players who were born on or after July 1, 2004, (who are defined as 18 & under by the USAV Age Definition) and are in the 11th grade for the current academic year are waived to compete in 17 & Under. (This age waiver is based on recruiting concerns for the 11th grade girls previously required to participate in girls 18's qualifiers and the 18's GJNC.)

³**Male Only** - Players who were born on or after July 1, 2007 OR players who were born on or after July 1, 2006 (15 years or younger) who shall neither have completed nor are in a grade higher than the eighth (8th) grade during the current academic year **are eligible to play in the 14 & under division**. This exception is based on the net height difference of 7'4 1/8" to 7'11 5/8" between the 14 and Under Division and the 15 and Under Division

⁴**Male Only** - Players who were born on or after July 1, 2008 (14 years or younger) who shall neither have completed nor are in a grade higher than the seventh grade (7th) during the current academic year are eligible for a Region approved waiver to compete in the boys 13's age group.

⁵**Male Only** - Players who were born on or after July 1, 2009 (13 years or younger) who shall neither have completed nor are in a grade higher than the sixth grade (6th) during the current academic year are eligible for a Region approved waiver to compete in the boys 12's age group.

Cost of Teams

17U Travel Team: \$3,700 (4 Travel & 4 Regional Tournaments)

16U/15U Travel Team: \$3,450 (3 Travel & 5 Regional Tournaments)

Regional Teams: \$2,200 (5 Regional Tournaments)

Included in Cost

- * Gym Rentals
- * Uniform Package
- * Qualified Impact Certified Coaches
- * Training Equipment
- * Two practices a week (1 ½ hrs each)
- * Local & Travel Tournament Entry Fees
- * Hotel Accommodations for Travel Teams



PAYMENT SCHEDULE

- Split into 3 payments
 - 1st Payment- $\frac{1}{2}$ of total cost: Due at Commitment Night on 11/13
 - 2nd Payment- $\frac{1}{4}$ of total cost: Due @ End of January
 - 3rd Payment- $\frac{1}{4}$ of total cost: Due @ End of February
- Save 5% by paying cash for any payment



SCHOLARSHIPS

- This year, LHVA will be offering five \$500 scholarships for players on travel or regional teams.
- PLAYERS need to submit a one page typed essay explaining why they deserve this scholarship.
- PARENTS need to submit a brief narrative describing the financial need for the money.
- Must be emailed to info@lhvavolleyball.com on or before 12/12 with the Subject Titled: 2022-2023 LHVA Scholarship.
- Players will be notified by email by 12/19.

REQUIREMENT FOR PLAYERS ON TRAVEL TEAMS & PLAYERS RECEIVING SCHOLARSHIPS

- All players receiving a scholarship and all players on either the 17 Travel, 16 Travel or 15 Travel team are required to volunteer for least 2 Saturdays in our Developmental Program.
- **Dates:** December 3, 10 & 17, January 7, 14, 21 & 28 and February 4
- **Time:** 9:00am - 1:00pm



DEVELOPMENTAL PROGRAM



Cost: \$275- nonrefundable/ can't be prorated

Place: Level Fitness Pelham

Time:

9:00am-10:00am/1st-4th Grade

10:00am-11:00am/5th & 6th Grade

11:00am-12:00pm/7th & 8th Grade
Session 1

12:00pm-1:00pm/7th & 8th Grade
Session 2



**2022-2023
Developmental
Program Flyer**

2022 - 2023 Developmental Program

Dates:

December 3, 10 & 17

January 7, 14, 21 & 28

February 4

Where:

Level Fitness Pelham

872 Pelham Pkwy

Pelham, NY 10803

Registration will OPEN on
November 1st at 9am.

Registration Link be available here!

2022-2023 Important Document



**LHVA Developmental
Insurance and Release Form**

Players MUST bring a signed copy of the
Insurance and Release Form to the first
practice on 12/3.

NEW ROCHELLE YMCA

50 Weyman Ave

New Rochelle, NY 10805



LEVEL FITNESS PELHAM

872 Pelham Pkwy

Pelham, NY 10803



PRACTICES

Practices start the week of 11/14
Season closes at end of April or beginning of May

No Practice:
November 23 & 24
December 26-29
February 20-23
April 3-6



Additional optional practices available for travel teams over February & April Break

2022–2023 Practice Schedule & Coaches

Team	Location	Days	Times	Coach
17 Purple (Travel)	Level Fitness Pelham	Tuesday/Thursday	7:15–8:45pm	Beth/Blaine
17 Black (Regional)	New Rochelle YMCA	Monday/Wednesday	7:30–9:00pm	Doug/Joseph
16 Purple (Travel)	Level Fitness Pelham	Monday/Wednesday	7:15–8:45pm	James/Mariel
16 Black (Regional)	Level Fitness Pelham	Tuesday/Thursday	5:45–7:15pm	Beth/Blaine
15 Purple (Travel)	New Rochelle YMCA	Tuesday/Thursday	7:30–9:00pm	Anthony/Melissa
15 Black (Regional)	New Rochelle YMCA	Tuesday/Thursday	7:30–9:00pm	James/Chrissy
15 White (Regional)	New Rochelle YMCA	Tuesday/Thursday	6:00–7:30pm	Jojo/Leslie
14 Purple (Regional)	Level Fitness Pelham	Monday/Wednesday	5:45–7:15pm	James/Mariel
14 Black (Regional)	New Rochelle YMCA	Tuesday/Thursday	6:00–7:30pm	Anthony/Joseph
13 Purple (Regional)	Level Fitness Pelham	Tuesday/Thursday	4:15–5:45pm	Beth/Leslie
13 Black (Regional)	Level Fitness Pelham	Monday/Wednesday	4:15–5:45pm	James/Angie
Additional Regional Team	New Rochelle YMCA	Monday/Wednesday	7:30–9:00pm	Chris/Nora

The placement of players on teams is based on their ability. Players and parents may not request specific practice times

TRAVEL TOURNAMENTS

17 Purple, 16 Purple & 15 Purple



➔ [Tournament Website](#)

Location

Connecticut Convention Center

100 Columbus Blvd
Hartford, CT 06103

16U Travel Team

January 7-8, 2023

17U Travel Team

January 14-16, 2023

15U Travel Team

January 21-22, 2023



➔ [Tournament Website](#)

Location

*The Boston Convention and
Exhibition Center*

415 Summer St
Boston, MA 02210

16U & 15U Travel Team

February 24-26, 2023

17U Travel Team

March 3-5, 2023



➔ [Tournament Website](#)

Location

*Atlantic City Convention
Center*

1 Convention Blvd.
Atlantic City, NJ 08401

17U, 16U & 15U Travel Team

April 22-23, 2023

Additional Travel Tournament for 17U



➡ [Tournament Website](#)

17U Travel Team

February 18-20th, 2023

Location

Walter E. Washington Convention Center

801 Mt. Vernon Place NW

Washington, DC 20001

REGIONAL TOURNAMENTS

- **More definite schedule in December**
- **Regional tournaments can be up to 1½ hrs away**
- **The season will conclude with the Regional Championships (Unless a team qualifies for Nationals (separate cost))**
- **Possibly Different Formats- Mostly Full Day and Some ½ Day Events**

Tentative Tournament Schedule- GEVA Events	
13s	March 25 & April 22
14s	February 11, March 11, March 18 & May 6
15s	January 28, March 4 & April 29
16s	February 12, March 26 & May 7
17s	January 29, March 19 & April 30



CLUB RULES AND POLICIES

Player Commitment: LHVA is designed to improve and enhance a female athlete's skills and abilities. It is the player's responsibility to fully commit to the club and their team in order to get the best experience from the program. 100% commitment of the player's time and effort is required. Other sports should not consistently interfere with practices and/or tournaments. Any school conflicts must be presented to the coach at the beginning of the season.

Parent Commitment: Parents are a key role in this experience. Your dedication to your daughter and their commitment to the club is essential. Driving your daughter back and forth to tournaments within our region and practices takes a lot of commitment on your part. Also, one parent from each team is asked to volunteer as a team parent.

CLUB RULES AND POLICIES

Player Attendance Policy	<ul style="list-style-type: none">• Any conflicts not previously approved by coach:<ul style="list-style-type: none">• Every 3 times being late- sit one game at the next tournament• Miss a practice- sit at least 1 game at the next tournament• Miss a tournament- sit at least 2 games at the next tournament
Playing Time	<ul style="list-style-type: none">• Travel: Based on merit, attendance & attitude• Regional: Player sits no more than 2 consecutive games/ depending on position/ player will play at least 3 positions• Late to tournament - sit the first match

TRYOUTS

Must Attend Both Dates

Location: New Rochelle YMCA

Fee: \$75 non-refundable (does not include GEVA Player Registration Fee)

Register Online w/ LHVA from 10/12-10/24 to save \$15

All players must attend the tryout for their age group unless they have previously played up a level on a LHVA Team

Saturday, October 29th & November 5th

Age Group	Tryout Time
13U	9:00am-10:15am
14U	10:45am-12:00pm

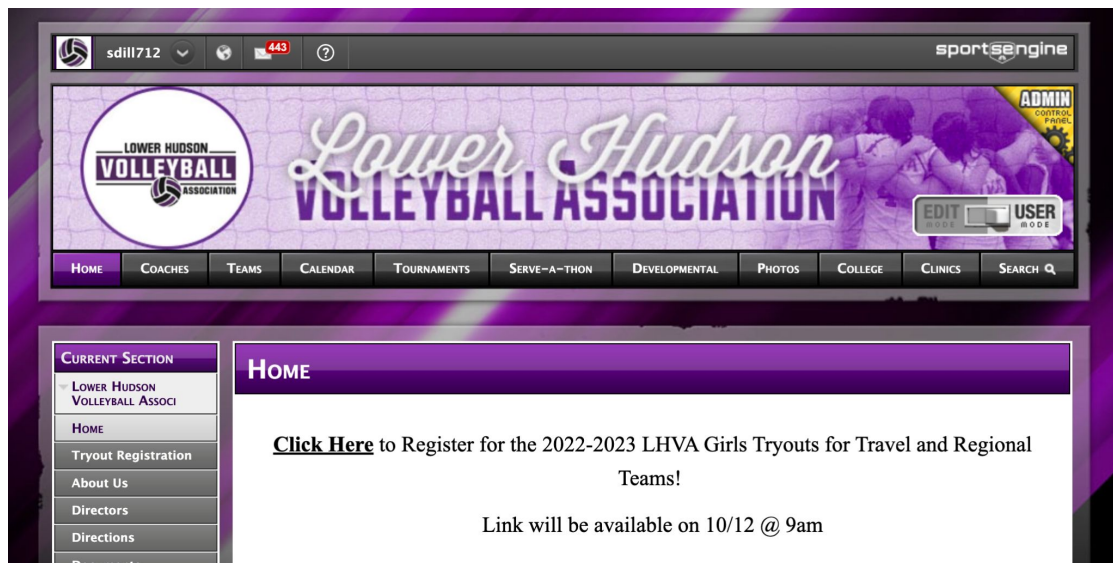
Sunday, October 30th & November 6th

Age Group	Tryout Time
15U	9:00am-10:15am
16U/17U	10:45am-12:00pm

TRYOUT REGISTRATION

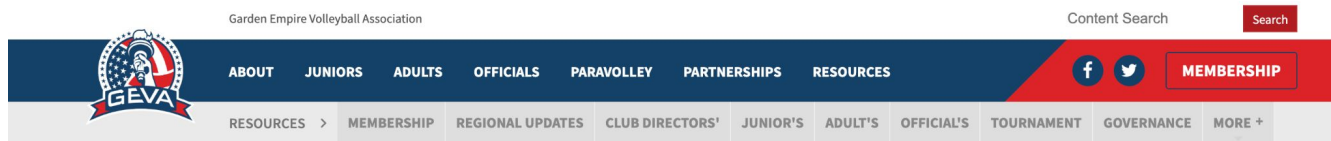
MUST be registered with GEVA and LHVA online prior to tryouts.

Each player MUST bring the GEVA Medical Form, Proof of GEVA membership, and tryout fee (if not paid online) to registration.



GEVA REGISTRATION

- MUST be registered in order to tryout.
- Bring GEVA Medical Release Form and Proof of Registration to the 1st day of tryouts.



Click Here to Register



Membership Registration

REGISTRATION

USAV continues its partnership with the SportsEngine Member Management System. The GEVA Region is using this system along with other Regional Volleyball Associations.

To prepare for the season each family should create a free "household" SportsEngine account. This account will be required prior to registering for a GEVA Region/USA Volleyball membership. The SportsEngine account is not a GEVA Region/USA Volleyball membership. Do so by clicking the sign in link at the top right corner of this page. You will use your "household" account to purchase all other accounts for your family members. (For help with this see the parent resources below or watch the Membership 101 video)

After you create your "household" SportsEngine account go ahead and register your GEVA/USAV Membership. The blue link at the top right of this page.

GEVA / USAV MEMBERSHIP REGISTRATION

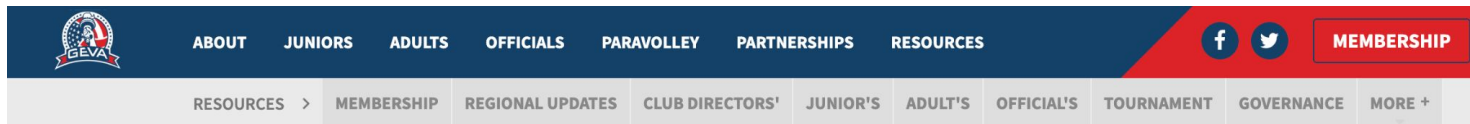
Memberships for season found here starting 8/2/2022.

REFUND POLICY:

IMPORTANT: According to GEVA Policy memberships of any type or duration are NOT REFUNDABLE under any circumstance or condition.

HOW TO UPGRADE (OR CHANGE) YOUR MEMBERSHIP IN SPORTSENGINE

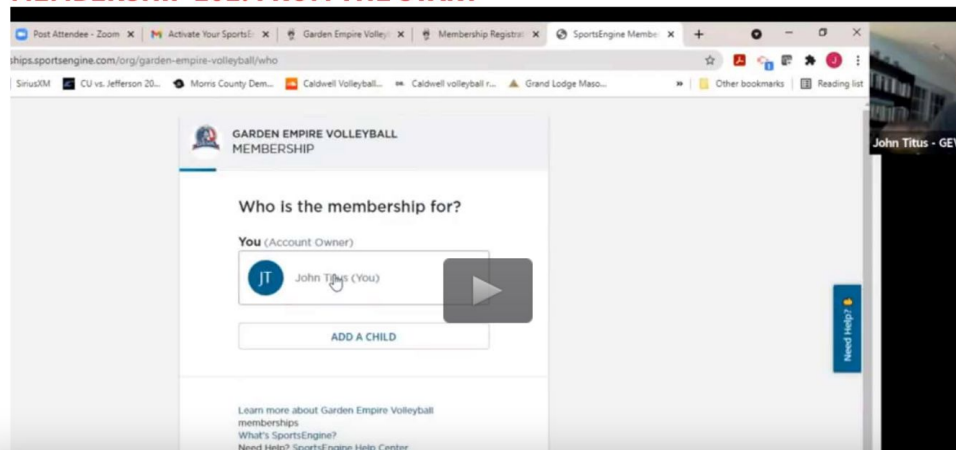
GEVA REGISTRATION HELP



After you create your "household" SportsEngine account go ahead and register your GEVA/USAV Membership. The blue link at the top right of this page.

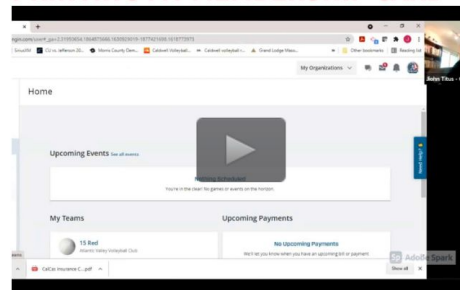
PARENT RESOURCES FOR CREATING HOUSEHOLD MEMBERSHIPS

MEMBERSHIP 101: FROM THE START



HOW TO UPGRADE (OR CHANGE) YOUR MEMBERSHIP IN SPORTSENGINE

PRINTING MY MEMBERSHIP CARD



GEVA REGISTRATION HELP

[ABOUT](#)[JUNIORS](#)[ADULTS](#)[OFFICIALS](#)[PARAVOLLEY](#)[PARTNERSHIPS](#)[RESOURCES](#)[MEMBERSHIP](#)[RESOURCES >](#)[MEMBERSHIP](#)[REGIONAL UPDATES](#)[CLUB DIRECTORS'](#)[JUNIOR'S](#)[ADULT'S](#)[OFFICIAL'S](#)[TOURNAMENT](#)[GOVERNANCE](#)[MORE +](#)

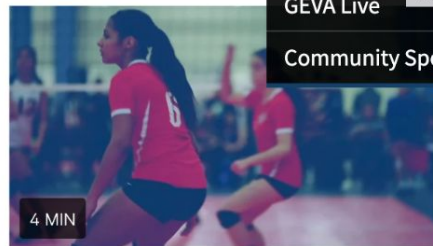
RESOURCES FOR PARENTS



Parents - Intro



Parents- Account Creation/Log-In



Parents - Purchasing Memberships



Parents Require

[Social Media](#)[MMS Help Videos](#)[GEVA Live](#)[Community Spotlight](#)

click to go to 'Sports Engine MMS Help Videos'

Need Help?

GEVA MEDICAL RELEASE FORM



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: _____ Team Name: _____

First Name _____ Last Name _____ Birth Date _____ Age _____ ☐ Male ☐ Female

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

Important Dates

Date	Time	Event
10/29, 10/30, 11/5 & 11/6	Saturday OR Sunday Dates and Times Depends on Age Group	LHVA Tryouts @ New Rochelle YMCA
11/13	TBD	LHVA Commitment Date and Uniform Sizing
11/14	Depends on Team	Practices start this week for all teams
November 23 & 24 December 26-29 February 20-23 April 3-6	No Practices	Holiday Breaks (Optional Practices Available for Travel Teams over February & April Break)

QUESTIONS



Email: info@lhvavolleyball.com

Website: www.lhvavolleyball.com

Co- Directors:

Sloane Dill
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Mark Finegan
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Beth Pirrone
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James Horan
(516) 695-3356