Team Commitment & Acceptance Agreement

Player Name: _____ Date of Birth: _____

Parent/Guardian: _____ Phone: _____

Email: _____ Offer Date: _____

Age Division: _____ Team Offered: _____ Coach: TBD

SIZES

JERSEY	T-SHIRT	SWEATSHIRT	SWEATPANTS

PLAYER & PARENT COMMITMENT

Congratulations on being selected for 2026-'27 Reno Volleyball Club Team. This agreement outlines the expectations that help create a positive, competitive, and respectful experience throughout the season.

Initial

_____ **I accept the roster position offered by Reno Volleyball Club.**

_____ **I understand a $350 non-refundable deposit reserves my roster position.**

_____ **I agree to complete all RVC, NCVA, and USA Volleyball registration requirements.**

_____ **I understand attendance at practices and tournaments is expected.**

_____ **I understand playing time is earned and not guaranteed.**

_____ **I agree to demonstrate sportsmanship, respect, and teamwork.**

_____ **I understand schedules, locations, and coaching assignments may change.**

_____ **I agree to follow Reno Volleyball Club and NCVA policies.**

_____ **I have read this agreement and voluntarily accept my position.**

COMMITMENT ACKNOWLEDGMENT

By signing below, we acknowledge that we understand and accept the responsibilities outlined above.

Player Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

RVC Representative: _____ Date: _____

OFFICE USE ONLY

Accepted ☐ Pending ☐ Wait List ☐ Declined ☐

Date Deposit Received: _____ NCVA/USAV Complete: ☐ Yes ☐ No Coach Initials: _____

Deposit Paid: CHECK # _____ CASH _____ VENMO _____ ZELLE _____