

DATE

	LOCAL TEAM: COACH:				
- [Y / //	SEASON FEES:				
	PLAYER NAME:				
V					
I, the parent/guardian of _ the policies and practices understand, and agree to are allowing our daughter June 2017).	of La Jolla Voll the LJV Code o	eyball Club (h of Conduct. H	ereafter call laving been	ed LJV). We selected for a	have read, a team, we
I understand that I am resexpenses not included in tournaments, food/snacks throughout the season.	the club fees (tr	ransportation t	to/from prac	tice, transpor	rtation to/from
I understand that there is	a significant tim	ne commitmen	nt involved in	n practice and	d competition.
I have reviewed the fee so	chedule and un	derstand that	I must pay a	all fees in full,	regardless of
the duration of participation	on.				
I agree to and will support that once registered with other competing tourname	LJV, the player	will be unable	to transfer		
PARENT/GUARDIAN NA	ME				
PARENT/GUARDIAN SIG					