



## Club One AZ | Tryout Check List | 2023

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Try-out Number

Walk-up Registration \_\_\_\_\_

At Checkout for Team Commitment, these forms are required:

Club One Waiver \_\_\_\_\_

\_\_\_\_\_ Copy of Birth Certificate (if new to Region)

Court One Waiver \_\_\_\_\_

\_\_\_\_\_ Concussion Acknowledgment Form Signed

\_\_\_\_\_ SafeSport Form Signed

\_\_\_\_\_ Medical Release Form Signed

\_\_\_\_\_ Club One Player Contract Signed

\_\_\_\_\_  
FOR CLUB ONE USE ONLY:

Contract Acceptance:

Amount: \$\_\_\_\_\_ Cash      Check# \_\_\_\_\_ Credit Card

\_\_\_\_\_ Player Fee Received

\_\_\_\_\_ Credit Card Authorization Form (if paying installments)

Team \_\_\_\_\_

Notes

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Arizona Region of USA Volleyball  
Mild Traumatic Brain Injury (MTBI) / Concussion  
2023-2024 Statement and Acknowledgement Form**



I, \_\_\_\_\_ (athlete), acknowledge that I have to be an active participant in my own health and have the direct responsibility for reporting all of my injuries and illnesses to the organization's staff (e.g., coaches or athletic training staff). I further recognize that my physical condition is dependent upon providing an accurate medical history and a full disclosure of any symptoms, complaints, prior injuries and/or disabilities experienced before, during or after athletic activities.

By signing below, I acknowledge:

- \* My Arizona Region and USA Volleyball membership registration is not complete and I will not be put on a roster for participation until this signed form is on file with the Arizona Region office each season.
- \* My organization has provided me with the CDC Concussion Fact Sheet on the definition of a concussion, the signs and symptoms of a concussion and what to do if I suspect I have a concussion. Each Fact Sheet is specific to Parents and to Players. The Fact Sheets can be found on the AZ Region website Handbook
- \* I ACKNOWLEDGE THAT I HAVE READ THE FACT SHEETS for Parents and for Players.

For more education on concussions, I can go to: <http://www.cdc.gov/headsup/youthsports/index.html>

A free Online Training Course by the CDC can be found at <http://www.cdc.gov/headsup/youthsports/training/index.html>

A free 20-minute concussion education course can be taken at <https://nfhslearn.com/courses?searchText=Concussion>

**FURTHERMORE:**

- \* I have fully disclosed to the staff any prior medical conditions and will also disclose any future conditions.
- \* There is a possibility that participation in my sport may result in a head injury and/or concussion. In rare cases, these concussions can cause permanent brain damage, and even death.
- \* A concussion is a brain injury, which I am responsible for reporting to the team physician, athletic trainer, coach, parent volunteer, or official.
- \* A concussion can affect my ability to perform everyday activities, and affect my reaction time, balance, sleep, and classroom performance.
- \* Some of the symptoms of concussion may be noticed right away while other symptoms can show up hours or days after the injury.
- \* If I suspect a teammate has a concussion, I am responsible for reporting the injury to the staff.
- \* I will not return to play in a practice, match or tournament if I have received a blow to the head or body that results in concussion related symptoms UNTIL my symptoms have resolved AND I have written clearance to do so by a qualified health care professional. An athletic trainer is not authorized to give clearance to return to play.
- \* In the Arizona Region, I may not return to practice or play during the same event (practice, match, tournament) in which the concussion related symptoms occurred.
- \* Following a concussion, the brain needs time to heal. I understand that I am much more likely to have a repeat concussion or further damage if I return to play before the symptoms have resolved.

I represent and certify that my parent/guardian and I have read the entirety of this document and fully understand the contents, consequences and implications of signing this document and that I agree to be bound by this document. (BOTH student athlete AND parent/legal guardian must sign below – please use black or blue ink only)

For identification purposes only please indicate the **Athlete's Date of Birth** \_\_\_\_\_

**Student Athlete:**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/legal guardian:**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Arizona Region of USA Volleyball SafeSport Program Document 2023-2024 Season



The US Olympic and Paralympic Committee, USA Volleyball and the Arizona Region of USA Volleyball are committed to creating a safe and positive environment for its participants' physical, emotional and social development and ensuring it promotes an environment free from abuse and misconduct. As part of this program, the above have implemented policies intended to reduce, monitor and govern the areas where potential abuse and misconduct might occur.

It is understood that the discussion of this subject matter with minor participants can vary greatly depending on the age of the child. Please age appropriately discuss each of these items with your child who is applying for membership. NOTE: It is now a requirement that all junior players that are 18 or will be turning 18 during the current season take SafeSport Core Training prior to being placed on a team roster.

For better understanding of abuse and misconduct in sport, the following definitions are being used:

### **Bullying, Threats and Harassment**

Bullying is the use of coercion to obtain control over another person or to be habitually cruel to another person.

Bullying involves an intentional, persistent or repeated pattern of committing or willfully tolerating physical and non-physical behaviors that are intended to cause fear, humiliation or physical harm in an attempt to socially exclude, diminish or isolate another person. Bullying can occur through written, verbal or electronically transmitted expression or by means of a physical act or gesture. Bullying behavior is prohibited in any manner in connection with any USAV/AZ Region sanctioned activity or event.

Another glaring example of bullying, threats and harassment is bad parent/spectator behavior at tournaments or practices. Yelling at, belittling or harassing junior players, line judges/scorers/officials, harassing officials, harassing coaches, disobeying site directors and facility personnel, physically aggressive language and behavior towards junior players, coaches, or other parents and trashing team camps or facilities is not acceptable behavior. This behavior is not "part of the game" - it is abuse. For articles on how to be a better sports parent visit <https://loudounelitevb.com/page/show/7667661-sports-parents>. This behavior must be removed from our game. Parent behavior is the number one reason we are losing officials and facilities to host events.

### **Hazing**

Hazing includes any conduct which is intimidating, humiliating, offensive or physically harmful. The hazing conduct is typically an activity that serves as a condition for joining a group or being socially accepted by a group's members. Activities that fit the definition of hazing are considered to be hazing regardless of a person's willingness to cooperate or participate.

Hazing does not include group or team activities that are meant to establish normative team behaviors or promote team cohesion so long as such activities do not have reasonable potential to cause emotional or physical distress to any participant.

### **Harassment, Including Sexual Harassment**

Harassment in sport includes any pattern of physical and/or non-physical behaviors that are intended to cause fear, humiliation or annoyance; offend or degrade; create a hostile environment; or reflect discriminatory bias in an attempt to establish dominance, superiority or power over an individual participant or group based on gender, race, ethnicity, culture, religion, sexual expression or mental or physical disability.

Sexual Harassment is a form of harassment. Unwelcome sexual advances, requests for sexual favors, or other verbal, nonverbal or physical conduct of a sexual nature may constitute sexual harassment, even if the harasser and the participant being harassed are the same sex and whether or not the participant resists or submits to the harasser. Any conduct of a sexual nature directed by a minor toward an adult or by an adult to a minor is presumed to be unwelcomed and shall constitute sexual harassment.

### **Emotional Misconduct**

Emotional misconduct involves a pattern of deliberate, non-contact behavior that has the potential to cause emotional or psychological harm to a participant. These behaviors may include verbal acts, physical acts or acts that deny attention or support.

Examples of emotional misconduct, without limitation include: a pattern of verbal behaviors that attack a participant (e.g. calling them worthless, fat or disgusting); repeatedly and excessively yelling at a participant(s) in a manner that serves no productive motivational purpose; by physically aggressive behavior (e.g. throwing sport equipment, water bottles or chairs; punching objects).

### **Physical Misconduct**

Physical misconduct means physical contact with a participant that intentionally causes or has the potential to cause the participant to sustain bodily harm or personal injury. Physical misconduct also includes a physical contact with a participant that intentionally creates a threat of immediate bodily harm or personal injury. Physical misconduct may also include intentionally hitting or threatening to hit an athlete with objects or sports equipment. In addition, physical misconduct also includes providing alcohol to a participant under age of consent and the providing of illegal drugs or non-prescribed medications to any participant.

### **Sexual Misconduct**

Sexual misconduct of a minor occurs when an adult employee, volunteer, independent contractor, support staff or other participant (hereafter known as "the adult") touches a minor for the purpose of causing the sexual arousal or gratification of either the minor or "the adult", if the touching occurs at the request or with the consent of "the adult".

Sexual misconduct may also occur between adults or to an adult. Sexual misconduct includes sexual interactions that are nonconsensual or accomplished by force or threat of force, or coerced or manipulated, regardless of the age of the participant.

Neither consent of the minor to the sexual contact, mistake as to the age of the participant or the fact that the sexual contact did not take place at a volleyball function are defenses to a complaint of sexual misconduct.

Sexual misconduct may also include non-touching offenses including but not limited to: sexually harassing behaviors; an adult discussing his/her sex life with a minor; an adult asking a minor about his/her sex life; an adult requesting or sending nude or partial dress photo to a minor; exposing minors to pornographic material, sending minors sexually explicit electronic message or photo (e.g. "sexting"); deliberately exposing a minor to sexual acts; or deliberately exposing a minor to inappropriate nudity.

### **Reporting**

All USA Volleyball/Arizona Region member programs are required to have a SafeSport Contact person identified in their club. The Arizona Region has an identified SafeSport contact. USA Volleyball has a SafeSport Director. The USOC has opened the US Center for SafeSport for reporting sexual misconduct. Depending on the actual or perceived violation of SafeSport policies contact the person you would feel most comfortable reporting the violation to. In all cases involving suspicions of child physical or sexual misconduct the report will also involve local law enforcement. Out of respect for the importance of this issue and to encourage honest and effective reporting, knowingly making a false or vindictive report will not be tolerated and may be a violation of USA Volleyball's Code of Conduct.

Arizona Region Contact: Cindy Kirk - [SafeSport@azregionvolleyball.org](mailto:SafeSport@azregionvolleyball.org) or call 480-993-6176.

To Report Sexual Abuse or Misconduct: <https://usavolleyball.org/safesport/> or contact Cindy Kirk

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*USA Volleyball and the Arizona Region have adopted the USOPC's SafeSport Training Materials.*

*These training materials, which include a series of online training videos and other resources, can be found on*

*<https://usavolleyball.org/safesport/> or <https://uscenterforsafesport.org/nqb-services/training/>*

*Everyone is encouraged to take the SafeSport Training and "Make the Commitment to Stop Abuse in Sport".*

*USA Volleyball has created a dedicated webpage of Resources for Athletes*

*<https://usavolleyball.org/safesport/for-athletes/>*

*Be a better sports parent/spectator*

*visit <https://www.loudounlitevb.com/page/show/7667661-sports-parents>*

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Print only this page, sign and submit to the Region

Arizona Region of USA Volleyball  
SafeSport Parent/Participant Form  
2023-2024 Season



The US Olympic and Paralympic Committee, USA Volleyball and the Arizona Region of USA Volleyball are committed to creating a safe and positive environment for its participants' physical, emotional and social development and ensuring it promotes an environment free from abuse and misconduct. As part of this program, the above have implemented policies intended to reduce, monitor and govern the areas where potential abuse and misconduct might occur.

The policies that are currently part of the SafeSport Program are defined on the Arizona Region of USA Volleyball SafeSport Program document and in the USAV SafeSport Handbook and Resource page of the USAV website

<https://usavolleyball.org/safesport/>. Those policies include:

- Bullying, Threats and Harassment
- Hazing
- Harassment, including Sexual Harassment
- Emotional Misconduct
- Physical Misconduct
- Sexual Misconduct

While other team members may often be the perpetrator of abuse and/or misconduct, it is a violation of these policies if a coach or other responsible adult knows or should have known of the abusive behavior but takes no action to intervene on the behalf of the targeted participant(s).

Parent education is one of the keys to keeping a program safe from abuse and misconduct. Parents can assist by helping to avoid situations in which misconduct can occur, by being aware of the signs and symptoms of abuse and by reporting suspected abuse. Parent Resources can be found at <https://usavolleyball.org/safesport/for-parents/>

Parent/spectator behavior has become a major issue at tournaments. Aggressive language or behavior, belittling and harassing junior players, line judges, scorers, R2 officials, R1 officials, site directors or other tournament personnel is not "part of the game". It is abuse. Visit <https://loudounelitevb.com/page/show/7667661-sports-parents> on how to be a better sports parent. Parent behavior is the number one reason we are losing officials and facilities to host.

USA Volleyball and the Arizona Region have adopted the USOPC's SafeSport training materials. These training materials which include a series of online training videos and other resources can be found on <https://usavolleyball.org/safesport/safesport-training/>. Everyone is encouraged to take the SafeSport Training and Make the Commitment to Stop Abuse in Sport. The SafeSport Training course for credit as a coach/official/chaperone is available after registering through the Member Management System and then accessed through the USAV Academy. USA Volleyball has created a dedicated webpage for Athlete Resources. This can be found at <https://usavolleyball.org/safesport/for-athletes/>

If your chosen club does not talk to you about SafeSport and let you know who their SafeSport Contact is for the club, ASK THEM for their SafeSport policies and the SafeSport Contact for the Club.

Depending on the type of issue, report all actual or perceived violations to your club's SafeSport contact, the Arizona Region SafeSport Contact, USA Volleyball SafeSport and/or local law enforcement.

My signature below indicates that I have read the Arizona Region SafeSport Program document and discussed it with my child who is applying for membership. I understand that this signed form (page 3 of this document) is required to complete my child's membership with the Arizona Region of USA Volleyball.

NOTE: It is now a requirement for all junior players that have turned 18 or will be turning 18 during the current season to take the SafeSport Core Training prior to being placed on a team roster.

Print Participant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



## AZ REGION 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: \_\_\_\_\_

☐ Male ☐ Female

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_

### 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 \_\_\_\_\_

If any of the below are None, Please write None.

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 known allergies:

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: \_\_\_\_\_

I, hereby, authorize emergency medical/dental care if, during the course of my daughter's/son's activities in volleyball, she/he should become ill or sustain an injury. 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





# Club One AZ | Player Contract Agreement

Player Name \_\_\_\_\_ Team \_\_\_\_\_

I hereby acknowledge that participation in athletics can result in injury. To the best of my knowledge, my child is in good physical condition and fully able to participate in the Club One AZ Volleyball program. I hereby agree and promise that I will not hold Club One AZ, its employees, members, or any other associated entities responsible for any loss, damage, or personal injury as a result of my child's participation and authorize the staff of Club One AZ and its agents to act on my behalf and in accordance with their best judgement in an emergency requiring medical attention.

I hereby agree to assume full responsibility for all medical and transportation expenses that may arise from any actions taken in good faith by the staff of Club One AZ or its agents.

I hereby agree to comply with all rules and regulations set down by USAVolleyball, the Arizona Region of USA Volleyball, the Amateur Athletic Union (AAU), and the Terms and Conditions of Membership for Club One AZ.

I hereby acknowledge that I have a financial obligation for Players Fees, in their entirety, when they are due. Failure to meet my obligation will result in loss of privileges. All fees associated with delinquent accounts will be the responsibility of the member, including fees assessed by the AZ Region, USAVolleyball, or AAU.

I hereby agree that Club One AZ has the duty to dismiss or terminate a player for disciplinary reasons that include, but are not limited to violations of: Player Code of Conduct, Parent Code of Conduct, breach of Terms and Conditions of Membership; local, state or federal laws; conduct unbecoming to the mission of Club One AZ; academic expulsion, etc.

I hereby acknowledge that if my membership is terminated prior to the end of the season, by my choice or actions deemed dismissible by Club One AZ, I am still responsible to meet all of my outstanding financial obligations.

I hereby agree that Club One AZ may use Media of my participating child, on its website, social media accounts or other promotional literature. This media may include, but are not limited to: photographs, video, etc.

I hereby agree that Club One AZ may publish and release my child's personal information as allowed by USAVolleyball guidelines: including, but not limited to: school information, graduation date, GPA, standardized test results, awards, address, phone, and email. This information may be made available to college coaches, representatives, and recruiting agencies for the sole purpose of student-athlete recruitment.

I hereby agree to indemnify and hold harmless Club One AZ, its officers, members, employees and any organization co-sponsoring the program, from and against any and all liability arising out of or in any way connected with the use or publication of this media.

I acknowledge that I have read and understand the Player Contract Agreement. I understand that these terms apply to the Player, Parents/Guardians and siblings of said player, when present at a Club One AZ, AZ Region and/or USAV/AAU sanctioned event. I enter into this contract freely and agree to abide by its intent and purpose.

\_\_\_\_\_  
Parent/Guardian Name (PRINTED)

\_\_\_\_\_  
Player Name (PRINTED)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Player Signature

\_\_\_\_\_  
Date



# Club One AZ

## Player Fee Payment Options

Payments for your Club One **Pay in Full Fee** Player Fees may be made by Cash, Check, or Credit/Debit Card on the day of tryouts. All **Installment Payments** will be accepted by *Credit Card only*.

We will ask that the **Credit Card Authorization Form** be submitted with the player's Commitment Fee on the day of tryouts. Club One will automatically debit the CC account on the first of the month beginning on January 1st with the final installment debited on April 1st.

In the unlikely possibility that the CC transaction is unsuccessful, requiring a new form of payment, a \$40 service fee will be assessed to the account.

The Player Fees posted on our website show both the **Pay in Full Fee** as well as the Fee if **Paid in Installments** (commitment fee plus 4 equal monthly installments).

The Player Fee will be due at team selection on **Tryout Day**. If you should choose to pay the **Player Fee in Installments** instead, a **Commitment Fee** is due at team selection, followed by 4 equal monthly installments due on the first of each month, *beginning on January 1st* and ending with your April 1st installment.

Please include **Player Name** and **Team Name** with any communication to us to ensure we credit your account accurately.





## Credit Card Authorization Form

Please complete all fields. You may cancel this authorization by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information				
Card Type (circle type):	MasterCard	VISA	AMEX	Discover
Cardholder Name (as shown on card):				
Card Number (last 4 digits if already on file):				
Expiration Date (mm/yy):				
Cardholder ZIP Code (from credit card billing address):				

I, \_\_\_\_\_, authorize Club One AZ to charge my credit card above for the Player Fee Installments associated with my daughter's team selection. I understand that my information will be saved on file for future transactions on my account.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date