



Commitment Letter

10U Only - Junior Teams

Player's First Name: _____ Player's Last Name: _____

Age Division: _____ Date of Birth: _____

Parent's Names: _____

Email Address: _____ Phone #: _____

By signing this form, the player and parent (or guardian) is stating your son will play club volleyball with Next Level Volleyball Club for the current season and you will pay all fees associated and agreed on within the season. Upon signing this form your \$100 deposit is due. Your deposit will go towards your club fees and is non refundable along with any other fees paid during the season, even in the case your child decides not to play for the Next Level Volleyball Club. In the event your child is unable to complete the season, payments must continue to be paid until there is no longer a balance. If the balance is unpaid by the end of the season for any reason then the player will not be allowed to play with Next Level Volleyball Club until any unpaid balances are paid in full. All payments will be set up to be withdrawn on the 15th of each from the account of your choosing.

Player's Signature _____

Parent's Signature _____

Payment Information:

Date Paid: _____ Amount Paid: _____

Payment Type: Cash Check Credit Card Payment taken by: _____

Card Holder Signature: _____