

## **Commitment Letter**

Boys Only

Player's First Name:	Player's Last Name:
Age Division:	Date of Birth:
Parent's Names:	
Email Address:	Phone #:
Level Volleyball Club for the season. Upon signing this for refundable along with any oth the Next Level Volleyball Club continue to be paid until there reason then the player will not paid in full. All payments will	rer and parent (or guardian) is stating your son will play club volleyball with Next current season and you will pay all fees associated and agreed on within the myour \$50 deposit is due. Your deposit will go towards your club fees and is non er fees paid during the season, even in the case your child decides not to play for ub. In the event your child is unable to complete the season, payments must is no longer a balance. If the balance is unpaid by the end of the season for any to be allowed to play with Next Level Volleyball Club until any unpaid balances are set up to be withdrawn on the 15th of each from the account of your choosing. O per player. 15&Up season fee total is \$450 per player.
Player's Signature	
Parent's Signature	
Payment Information:	
Date Paid:	Amount Paid:
Payment Type:	☐ Cash ☐ Check ☐ Credit Card Payment taken by:
Card Holder Signature:	