# Commitment Letter

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

Age Division: _____ Date of Birth: _____

Parent's Names: _____

Email Address: _____ Phone #: _____
(Same as email used to purchase USAV Membership)

By signing this form, the player and parent (or guardian) is stating your child will play club volleyball with Next Level Volleyball Club for the 2026-2027 season and you will pay all fees associated and agreed on within the season. Upon signing this form your $200 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 be placed on Region Hold and will not be allowed to play with Next Level Volleyball Club or another club until any unpaid balances are paid in full. All payments will be set up to be withdrawn each month from the account of your choosing. There is a $30 NSF fee on all returned transactions.

Player's Signature _____

Parent's Signature _____

Payment Information:

Date Paid: _____ Amount Paid: _____

Payment Type: ☐Cash ☐Check ☐ Credit Card Initials of payee: _____

Card Holder Number _____ Expiration Date: _____

Card Holder Signature: _____