



**Pi VOLLEYBALL**  
*the right equation*

## **Player/ Parent Tryout Information Sheet**

Thank you for attending Pi Volleyball club tryouts. Within 1-48 hours of the tryouts' conclusion, I will send an email to offer players a spot on a team, through the email address I have on file. If a player receives an offer letter for a Pi Volleyball team, a commitment is needed from the player/parent, verbally or written, immediately.

It is important to be honest in the commitment to accept a spot on a Pi Volleyball team as we do not keep everyone; cuts will be made as we form teams based commitments to a roster spot. If a roster spot is offered and NOT accepted, (or we do not hear from you), the next player on the depth chart will be offered that spot.

\*The following items are due at tryouts (\$40 tryout fee if not sent in):

Pi Volleyball medical consent form, attached

Pi Volleyball player/parent commitment/expectations form, attached

Pi Volleyball release form, attached

Player profile form, attached \*\*\* (AAU card by first practice)

See website for total costs and fee due dates.

During our first practice, we will be discussing uniforms, apparel requirements, etc. Parents are welcome to stay and ask any questions at this time.

Sincerely,  
Amy Matthews (PI)

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## Medical Consent Form

Player Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Height/Weight: \_\_\_\_\_

Primary Medical Insurance Provider: \_\_\_\_\_

Father/Guardian: \_\_\_\_\_ Employer: \_\_\_\_\_

Phone option #1: \_\_\_\_\_ Phone option #2: \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_ Employer: \_\_\_\_\_

Phone option #1: \_\_\_\_\_ Phone option #2: \_\_\_\_\_

If you wish your family doctor to be contacted in case of emergency:

Primary physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Does this player have any disabilities, handicaps, present injuries or limitations, allergies, hemophilia, history of respiratory illness, or any other significant medical condition? YES NO

If YES, please specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **EMERGENCY AUTHORIZATION**

I the undersigned, parent or legal guardian of the participant, a minor, hereby authorize the coaches, assistant coaches, Pi Volleyball staff, or parents of team members acting in the capacity of activity supervisors/mentors/vehicle drivers, as my Agents, to consent to medical, surgical, or dental examination and/or treatment.

In case of emergency I authorize treatment and/or care at any hospital. If there is an emergency and I cannot be reached, please contact the person named below who is also hereby authorized to act on my behalf.

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Phone option #1: \_\_\_\_\_ Phone option #2: \_\_\_\_\_

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

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**RELEASE, INDEMNIFICATION, AND HOLD HARMLESS AGREEMENT**

In consideration of participating in **volleyball games and practices**, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence **Pi Volleyball, RKH, LLC, Amy Matthews**, and it owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representatives and estate, and also agree as follows:

- 1. I acknowledge that volleyball involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to injury while playing, coaching, or being a spectator; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
- 2. I expressly accept and assume all of the risks inherent in the activity or that might have been caused by the negligence of the Releasees. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or mental conditions, then I will immediately discontinue participation.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes for action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
- 5. In the event that I file a lawsuit, I agree to do so solely in the state of Michigan, and I further agree that the substantive law of Michigan shall apply.
- 6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

**By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim of negligence.**

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would significantly be greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. **I have read and understood this document and I agree to be bound by its terms.**

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Date \_\_\_\_\_

**PARENT OR GUARDIAN ADDITIONAL AGREEMENT** (Must be completed for participants under the age of 18)  
In consideration of \_\_\_\_\_ (**print minor's name**) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on the behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian \_\_\_\_\_ Print Name \_\_\_\_\_

Date \_\_\_\_\_



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## Parent/Player Commitment Form

### **Parent Expectations:**

**SPORTSMANSHIP IS NOT ONLY HOW YOU PLAY THE GAME IT IS ALSO HOW YOU WATCH THE GAME...**

#### **• Support**

- o Come enjoy games and be supportive. Cheer for ALL Players to make them feel important.
- o Be positive and supportive whether the team loses or wins or if your child plays well or struggles.
- o Understand that the game can be difficult to learn and play.

#### **• Responsibility**

- o Have your child at practices and games early and ready to play in proper attire. Game times are start times not arrival times! Arrive 10 minutes early for practice, 30 minutes for games, unless otherwise specified.
- o Be a positive role model.

#### **• Respect**

- o Be respectful of ALL Players, coaches and referees at all times.
- o Please allow the coach to run the team. Please refrain from coaching from the sidelines.
- o There is a 24 hour rule after a tournament. Parents will wait at least 24 hours before discussing any issues with the coaching staff. Parents are only allowed to discuss issues with a coach after their daughter has approached and attempted to discuss issues with the coaching staff.
- o Please be respectful of all players during games and at home. Team struggles often begin with finger pointing and negative comments of other players at home.
- o NEVER use negative comments to or about players, coaches or referees.

### **Player Expectations:**

**ALWAYS REMEMBER THAT IT IS A PRIVILEGE TO PLAY ON A TEAM...**

#### **• Responsibility**

- o Time: be at least 10 minutes early to practice and 30 minutes early for games, unless otherwise specified. Be dressed and ready when practice or games begin.
- o Show up ready to play and give maximum effort.
- o Let the coach know if you will be late or will miss a game or practice so they can plan accordingly.
- o Take responsibility for your actions: If things are not going well, please do not point fingers or place the blame on others.
- o Learn the principles of positive reinforcement and apply them in practice and competition.

#### **• Focus**

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- o Give 100% Focus at all times
- o Whether at a game or practice, listen to the coach at all times.
- o Pay attention when you are playing or on the bench. Coaches are always teaching.
- o During a game, STAND with your team on the bench.
- o Always be prepared. You never know what can happen during a game so be ready to be called upon.
- **Respect**
  - o Be respectful of all players, coaches, referees and parents at all times including outside of the volleyball court.
  - o Do not question or talk back to coaches or referees.
  - o Overcome the urge to complain, think negatively, backstab, act selfishly, or engage in other unnecessary behavior that disrupts team chemistry.
  - o Negative comments or bad behavior will not be tolerated.
- **Effort**
  - o Give 100% EFFORT at all times.
  - o Remember you are part of a team and you need to give maximum effort.
  - o Maintain academics
  - o Work hard, physically and emotionally, on and off the court.
  - o Try to improve each day, as a player and as a person.
  - o Put the goal of the team above individual achievements.
- **HAVE FUN!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!**

**\*While there is NO GUARANTEED PLAYING TIME as Pi Volleyball aspires to be competitive, all best efforts will be made to have every player receive game/ tournament play experience.**

**Player's Signature:** \_\_\_\_\_  
**Player's Name:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_  
**Parent Name:** \_\_\_\_\_  
**Date:** \_\_\_\_\_



## Player Profile Form

Player Name: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Height: \_\_\_\_\_ School: \_\_\_\_\_

Trying out for: 12U 13U 14U 15U 16U 17U 18U

Playing Experience:

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

Position(s) previously played: \_\_\_\_\_

Desired Position(s) for this season: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_

Parents Name (s):

\_\_\_\_\_

Telephone: \_\_\_\_\_

Parents' Cell Number: \_\_\_\_\_,

Do the cell phone numbers above receive text messages? \_\_\_\_\_

Player's Cell Number: \_\_\_\_\_

Does your cell phone receive text messages? \_\_\_\_\_

Email: \_\_\_\_\_

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