

**Arizona Region of USA Volleyball  
Junior Club Director Agreement Form  
2012 Season**

Rcvd \_\_\_\_\_

By \_\_\_\_\_

As Club Director for the \_\_\_\_\_ (club name) I agree to the following requirements of a Junior Club Director in the Arizona Region of USA Volleyball. I understand that my club will not be recognized by the Arizona Region of USA Volleyball for the current season until this completed form and my full membership registration for the current season is received in the Arizona Region Office. Without recognition members will not be registered with my club and none of my teams will be allowed to enter any USA Volleyball or Arizona Region sanctioned events. Please acknowledge each statement of agreement by initialing on the line next to each statement and signing at the bottom of the page.

- \_\_\_\_\_ 1. I agree to abide by the rules and policies set forth in the Arizona Region Policy Manual.
- \_\_\_\_\_ 2. I agree that all my coaches, players, registrars, board members, chaperones and anyone else associated and participating with my club will be duly registered with the AZ Region prior to any participation with my club. All required background screens will be COMPLETED prior to any contact with players or player data.
- \_\_\_\_\_ 3. I agree to fulfill ALL personal and club financial obligations to the Arizona Region by the deadline provided.
- \_\_\_\_\_ 4. I understand that the Arizona Region strongly discourages club directors or coaches contacting potential club members or their parents in a way that distracts them from their school team responsibilities and participation. As such I agree that there will be no club initiated contact by me, my coaches or other club representatives with junior volleyball players or potential club members and their parents a minimum of 8 hours prior to and for the duration of a practice, match or tournament during the school season AND once a player has committed to a club through the last day of the Junior National Championships and High Performance Championships (if applicable). Contact during this time frame is a violation of Arizona Region recruiting policies and may be cause for sanctions imposed by the Ethics & Compliance Officer and the Executive Board.
- \_\_\_\_\_ 5. I agree that I will not make any financial arrangements for or other offers to a potential or current club member that could possibly jeopardize their AIA, NCAA or Arizona Region eligibility. It is the responsibility of the club to help educate their players and parents regarding eligibility and unethical offers and enticements that could jeopardize such.
- \_\_\_\_\_ 6. I agree that I will not make negative or intentionally false comments concerning other clubs or their staff to current or potential players, parents and coaches and will instruct my coaches and staff to refrain from the same.
- \_\_\_\_\_ 7. I agree that a player will have (3) three days to accept our club offer to play and the player will be entitled to a full refund of all contract and membership fee payments if they decide not to accept our club offer pursuant to the Arizona State Revised Statutes regarding contract law.
- \_\_\_\_\_ 8. I agree to communicate and supply a copy of our club philosophy regarding financial obligations, playing time, fundraising, and non-travel and travel teams to the players and parents in my club before they are asked to sign a contract. A copy of the club philosophies will be submitted to the Region office by Nov 1<sup>st</sup> for new clubs and existing clubs that have substantive changes from the previous year to any of their philosophies.
- \_\_\_\_\_ 9. I will require and enforce within my club that all my coaches will be current in their coach's certification as required by the Arizona Region Education Policy and Requirements. They will not be permitted to coach for my club until they are in compliance with the policy.

- \_\_\_\_\_ 10. I agree that I will educate my coaches in their responsibility to: 1. abide by the AZ Region/USAV Junior Club Personnel Code of Ethics; 2. be aware of and take action regarding potential health (i.e. eating disorders) and safety (i.e., concussions) issues regarding their players; 3. hold their parents and players accountable for their actions at tournaments and to take corrective action against them for unsportsmanlike or unruly behavior should it occur.
- \_\_\_\_\_ 11. I agree to instruct and hold my coaches responsible to be highly professional in representing the Arizona Region in matters dealing with their own players, other region member's players and parents and the officials.
- \_\_\_\_\_ 12. I agree that I will educate my chaperones to their responsibility to: 1. abide by the USAV Chaperone Responsibilities; and 2. enforce the AZ Region/USAV Code of Conduct with the players while on their watch at tournaments or other events where they are acting as chaperones.
- \_\_\_\_\_ 13. I understand that sexual abuse, sexual assault and sexual harassment is against the law, it is very detrimental to all involved and often goes unreported if it is happening. I understand that under the law it is my responsibility to report any and all known sexual abuse, sexual assault and/or sexual harassment to the proper authorities, including the Arizona Region of USA Volleyball. I attest that I know of no sexual abuse, sexual assault or sexual harassment that is occurring within my club and will report such if found, regardless of whom is involved.
- \_\_\_\_\_ 14. I agree that I will use the certificates of insurance issued by the Arizona Region for my club's sanctioned practices and/or hosted Arizona Region tournaments only. If the certificate of insurance is required for ANY other purpose an Application for Sanction Form will be submitted to the Arizona Region a minimum of 2 weeks BEFORE the event is to take place for approval or denial by the Arizona Region Commissioner. I will not secure the facility for my event with a certificate of insurance that was issued for practices before the event sanction has been approved. There are reporting requirements and a cost involved to sanctioning an event.
- \_\_\_\_\_ 15. I agree to cooperate fully with the Arizona Region of USA Volleyball in the event a complaint is filed against me, my club, my coaches, my players or my parents with the Arizona Region. My responses will be complete, truthful and prompt to expedite a quick resolution.

As club director I acknowledge my responsibility to adhere to the rules and policies of the Arizona Region of USA Volleyball. If these agreements are not adhered to, I agree to abide by the sanctions imposed by the Executive Board of the Arizona Region of USA Volleyball. In the event I fail to comply with the rules and policies of the Arizona Region I understand that my privilege to operate a club in the Arizona Region may be revoked.

Club Director Name \_\_\_\_\_ Date \_\_\_\_\_

Club Director Signature \_\_\_\_\_

If Applicable:

Co-Director Name \_\_\_\_\_ Date \_\_\_\_\_

Co-Director Signature \_\_\_\_\_