Full Time: 3 Practices Per Week

through the clu acquire, trust b	, fully commit to book and google drive, and will p etween my coaches and teammates	yer Commitment to playing for Santa Cruz Beach Volleyball Club. I l participate to my fullest potential. I will look to bui to give us the best opportunity to learn and interac that trust. I will always do my best for myself and o	ld, and t. I will respect
Signed:		Date:	
given program. most circumsta terminate a pla	, agree to p I understand that once this form is nces. In special circumstances, refur	nyment Contract pay Santa Cruz Beach Volleyball Club the full amous s signed and agreed upon, the program is non-refund ands can be given at the club's discretion. The club le and if the player is causing harm to the club, it's mer	ndable under has the right to
12/1/2018: 1/13/2018:	lue January 13, 2018: \$2500 Payment Schedule \$500 minimum deposit due. \$2000 remaining balance due. work for you, please submit your controls.	custom plan for club approval. We will review the s	ubmission and
•	\$500 minimum deposit due.		
C	ne club will review and sign. A copy	• •	
Signed: Please return si	gned form to:	gned:Date:	

Santa Cruz Beach Volleyball Club 1830 Jose Ave Santa Cruz, CA 95062