



The Niagara Rapids Volleyball Club Parent Financial Commitment

Financial Obligations **2024/2025 Season**

1. Athletes and parents agree to pay The Niagara Rapids Volleyball Club the total non-refundable individual athlete fee: \$1,450.00 - \$1850.00 (Competitive Team); \$2,150.00 – \$2550.00 (High Performance Team).
2. The Club will use best efforts to offer the program as described although reserves the right to modify the program at any time to best meet the Club, Team and Individual needs.
3. Parents will be responsible for providing full payment upon receipt of invoice.
4. Full payment on September 20th is preferred.
5. Payment plan options are available. These payment plans are non-negotiable. Please inquire about an application form, from your team Manager or Coach. Payment arrangements must be agreed upon prior to the first practice. There is a 10% surcharge added to any invoice that is not paid within a week of issuing the invoice.
6. The Parent Financial Commitment form must be returned with signature in addition to the Payment Plan Application.

Termination

1. The Club and Athlete recognize that circumstances may arise that make it impossible for an Athlete to continue to participate in the Program.
2. The Club and Athlete recognize that the financial success of the Program is based on full participation by all athletes in the program.
3. An Athlete may terminate their participation in the program if:
 - a. The non-refundable fees applicable to the program are paid in full.
4. The Club may terminate an Athlete's participation in the program for cause without notice and without any refund in fees. Such conditions include, but are not limited to, contravening the OVA Code of Conduct and the OVA Drug and Alcohol Policy, contravening the Rapids Social Media Policy as well as any of the Team policies established.
5. For a season ending injury, accompanied by a physician's note, a prorated refund will be given with the understanding that there are one-time costs that are not prorated eg uniform costs.

Athlete Name

Parent/Guardian (Print Name)

Parent/Guardian (Signature)

Date: _____