

HSE TNT Volleyball Club

2018-2019

Philosophy

HSE TNT Volleyball Club is built on the development of student athletes. TNT's main emphasis will be to provide a learning atmosphere for girls to develop and improve their volleyball skill sets that will be important for the long term benefit of the athletes. Positive intensity is the coaching staff's theme for each practice and tournament. Coaches attempt to give athletes all of the instruction and motivation needed to cultivate a learning environment, the rest is up to the athlete to take advantage of the opportunity placed in front of them.

Tryouts

Tryout dates and times are listed below. Please arrive early, dressed, and ready to go. Practices will start promptly at the times listed below.

Wednesday, October 3rd @ HSE HS Aux Gym

5th and 6th Grade - 6:30-7:30 p.m.

Sunday, October 7th @ Fall Creek Junior High School

5th and 6th Grade - 2:00-3:00 p.m.

7th and 8th Grade - 3:00-4:00 p.m.

Wednesday, October 10th @ HSE HS Aux Gym

5th and 6th Grade - 6:30-7:30 p.m.

7th and 8th Grade - 7:30-8:30 p.m.

***Please bring to tryouts:**

Player Registration Form

\$25 Tryout/Mini-Camp Fee (cash or check made out to HSE TNT)

T-shirt with players last name on back (handwritten is ok)

Recent Picture (which won't be returned)

Our goal is to have at least 1 team in each age groups.

Cost

The club cost is \$750 per player plus around \$65.00 for players pack (practice shirts & jerseys).

After the teams are selected, there will be a meeting for all families and athletes who make a team.

TNT Administrator

J'nai Stuller

13145 Cheval Ct., Carmel, IN 46033

(p):317-695-0077 jnaistuller@gmail.com

HSE TNT Volleyball Club

Registration and Release Form

Player Information (Print Clearly Please)

Player's Name: _____ Date of Birth: ___/___/___ Current Grade: _____

Address: _____ City: _____ Zip Code: _____

Home Phone Number: (____) _____ Player's Cell Phone: (____) _____

School Attending: _____ Future High School: _____

Playing Position(s):

Setter Middle Outside Hitter Defensive Specialist

Height: _____ T-Shirt Size (adult sizes): XS S M L XL

Medical Needs/Concerns: _____

Please list any sports you will be participating in during club season (Dec-May): _____

Trying out at other clubs: No Yes (Name of club) _____

Parent/Guardian Information

Parent/Guardian Name: _____ Email: _____

Work Phone: _____ Cell Phone: _____ Home Phone: _____

Parent/Guardian Name: _____ Email: _____

Work Phone: _____ Cell Phone: _____ Home Phone: _____

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND ASSUMPTION OF RISK

As consideration for being permitted to participate in the play and other activities in any party and/or program sponsored or managed by HSE TNT, I _____ parent or legal guardian of each minor child named below, for said child and for myself agree and acknowledge that I am voluntarily participating in such activities with the full knowledge that such activities carry inherent risks, dangers and other hazards which can result in serious personal injury or death. Further, I acknowledge that my participation in such activities is both voluntary and with full knowledge of the dangers involved and I hereby agree to accept and assume any and all risks of injury to myself or to my child's person or property, including death and agree that Hamilton Southeastern Schools shall have no liability to me, my heirs, assigns, successors, agents or any other party. As further consideration for being permitted to participate in the activities sponsored or managed by HSE TNT. I hereby forever waive, release and discharge Hamilton Southeastern Schools from all claims, demands, liabilities, actions or causes of actions of every kind in nature known and unknown which I may now have or which may hereafter accrue to me arising out of my participation in such activities.

I HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND ASSUMPTION OF RISK AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN HSE TNT AND ME IN WHICH I MAKE KNOWING AND VOLUNTARY WAIVERS AND RELEASES OF CERTAIN LEGAL RIGHTS AND SIGN IT ON MY OWN FREE WILL BELOW.

Participant Name: _____

Parent or Guardian Printed Name: _____

Date: _____

Parent or Guardian Signature _____