

# OSAGE COUNTY VOLLEYBALL CLUB – OCVBC

[www.ocvbc.net](http://www.ocvbc.net)

Email: [ocvbc@aol.com](mailto:ocvbc@aol.com)

## GENERAL INFORMATION – 2019-2020 Season

**Tryouts and Open Gyms:** See attached for Tryout dates per age division.

***NOTE: Players who have an excused conflict and cannot tryout with their designated age division on the date posted should inform the board by e-mail at: [ocvbc@aol.com](mailto:ocvbc@aol.com) as soon as possible.***

**Team Selections:** Players selected for an OCVBC team will be contacted by phone.

**Team Selections Posted:** Team rosters will be posted on the OCVBC website ([www.ocvbc.net](http://www.ocvbc.net)).

**Player/Parent Meeting:** **October or November 2019 – Date TBA**

*If selected for a team, the player and parent(s) must attend this meeting. Bring your family calendar so that tournament dates can be discussed with your coach and team.*

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**REMINDER:** A copy of your HOA registration/membership card **MUST** be presented in order to participate in OCVBC Tryouts. You will not be allowed to participate without it – no exceptions. Directions on how to register and print your card can be found on the HOA website – [www.hoavb.org](http://www.hoavb.org). Be sure to print out several registration/membership cards. You will also need to complete and print three copies of the Medical History and Release form at a later date for the Player/Parent Meeting, if you make an OCVBC team.

**The following document is required. Complete and bring to tryouts.**

- OCVBC Player Application / Questionnaire (attached) – Parent or legal guardian must sign for players under 18 years of age. Please note that by signing the Player Application, it is understood that playing volleyball for OCVBC will take priority over any other non-school sport/activity.

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Additional notes to parents:

- Please be informed that players can be hurt and hurt seriously playing volleyball.
- Club fees range from \$500 to \$700 per player, depending on the level of commitment selected by her team. Travel costs are not included in the club dues.
- OCVBC's goal is to have at least one team in each age group for 11s thru 17s. Some age groups may have more than one team. Teams are assembled to be competitive in tournaments sponsored by USA Volleyball. Teams will travel to out-of-town tournaments.
- The regular season runs from January through April. If a team chooses to do so, additional tournaments can be added during the season with play continuing through June and/or July. Additional tournaments will result in increased club dues for that team.

## AGE DEFINITIONS FOR 2019-2020

**10 & Under:** Players who were born on or after **September 1, 2009.**

**11 & Under:** Players who were born on or after **September 1, 2008.**

**12 & Under:** Players who were born on or after **September 1, 2007.**

**13 & Under:** Players who were born on or after **September 1, 2006.**

**14 & Under:** Players who were born on or after **September 1, 2005.**

**15 & Under:** Players who were born on or after **September 1, 2004.**

**16 & Under:** Players who were born on or after **September 1, 2003.**

**17 & Under:** Players who were born on or after **September 1, 2002.**

Tryouts will be closed to players and coaches only.

# OSAGE COUNTY VOLLEYBALL CLUB PLAYER APPLICATION

Print legibly please • Return at tryouts

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address/City/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School Grade in Fall 2019: \_\_\_\_\_ School attending next year : \_\_\_\_\_

USAV Age Group:      11U      12U      13U      14U      15U      16U      17U

Volleyball experience: \_\_\_\_\_ # years played in school    \_\_\_\_\_ # years played in club

Volleyball camps attended (circle types):      High School      College      USA Volleyball      Other

1. I will be playing the following sports during the OCVBC volleyball season:

**List Sport(s)**

**Season Time Frame**

- |                          |       |       |
|--------------------------|-------|-------|
| a. 1 school sport        | _____ | _____ |
| b. 2 school sports       | _____ | _____ |
| c. 1 non-school sport    | _____ | _____ |
| d. 2 non-school sports   | _____ | _____ |
| e. Only OCVBC volleyball |       |       |

***If I play a school sport and there is a conflict between the school sport & OCVBC practice or tournament, I will follow the policy and direction of the school I attend and the school sport will be the first priority. I will contact my school administrator or Activities Director to make sure I'm following the school policy while doing both a School sport and playing Club Volleyball for OCVBC.      (Circle Answer)    Agree      Disagree***

2. I will participate in the following **additional** activities between January and May (i.e. ACT/SAT exam, school play, band, choir, prom, Confirmation, etc.) List activities and dates below if known.

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3. If I participate in any **non-school** activity, I will adjust my schedule to make OCVBC practices and tournaments.  
(Circle Answer)    Agree      Disagree

4. I prefer that my team plays in the following number of tournaments:

- a. 2 to 4 tournaments      b. 5 to 6 tournaments      c. 7 or more tournaments

***I understand that by signing below my playing for OCVBC will take priority over any other non-school activity in which I choose to participate. By indicating my level of choice(s), I am committing to all practices and tournaments included in that choice(s) throughout the season.***

\_\_\_\_\_  
Player Signature

\_\_\_\_\_  
Parent/Guardian Signature

Player Name (Print) \_\_\_\_\_

Date \_\_\_\_\_

Father's Name (Print) \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Mother's Name (Print) \_\_\_\_\_

Daytime Phone \_\_\_\_\_