

**PARENT HANDBOOK**  
**2009-2010**



## **Our mission is.....**

To provide more young athletes with affordable opportunities to enjoy and grow in the sport of volleyball. We will offer National, Regional, AAU, and league teams for all ages and skill levels. It is our goal to improve the level of volleyball and coaching in the Tampa area.

## **A little about us.....**

Tampa United Volleyball Academy is entering its third season of competition in 2010. The emergence of this new organization, born out of previous organizations with decade long histories of success, maintains a commitment to the very best instruction at a reasonable cost. What makes us unique is that the Academy brings together the coaching staffs from the bay area's Universities and Colleges as well as many successful high school programs. Below is a sample of the coaches that have served and will serve on the board as well as serve as lead training coaches in the Academy:

Chris Catanach - Head Coach, University of Tampa

Sam Cibrone - Head Coach, Saint Leo University

Mike Flynn - Head Coach, Tampa Preparatory School

Dan King – Assistant Coach, St. Leo University

Jeff Lamm - Associate Head Coach, University of Tampa

Gary Larkin - Head Coach, Hillsborough Community College

Claire Lessinger - Head Coach, University of South Florida

Monica Medvid – Associate Head Coach, Hillsborough Community College

Kevin Reynolds - Head Coach, AHN

Tampa United Volleyball is committed to offering volleyball programs for all ages and levels. It is our intention to make sure each team in the Academy has the chance to work with our top coaches. Our Training coaches will not only train a team, they will be mentoring younger coaches by attending and running practices which will expose all of our teams to the Academy's most experienced coaches. We feel this approach will help us complete our mission.

## **Where will we practice.....**

Tampa United Volleyball Academy has invested in a 3-court facility located just off I-4 that we will have access to 24/7. Our teams may also practice at the University of Tampa campus and Hillsborough Community College campus as needed.

# **Tampa United Volleyball Board of Directors**

Executive Director:

Sam Cibrone [sam@tampaunitedvolleyball.com](mailto:sam@tampaunitedvolleyball.com) (813) 787 – 6221

Associate Director:

Gary Larkin [gary@tampaunitedvolleyball.com](mailto:gary@tampaunitedvolleyball.com) (813) 786 – 5900

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Advisory Board:

Chris Catanach [ccatanach@ut.edu](mailto:ccatanach@ut.edu)

Claire Lessinger [Claire.lessinger@mail.usf.edu](mailto:Claire.lessinger@mail.usf.edu)

Mike Flynn [mike@tampaunitedvolleyball.com](mailto:mike@tampaunitedvolleyball.com)

Kevin Reynolds [Kevin@tampaunitedvolleyball.com](mailto:Kevin@tampaunitedvolleyball.com)

Monica Medvid [monica@tampaunitedvolleyball.com](mailto:monica@tampaunitedvolleyball.com)

Coaches Education:

Chris Catanach [ccatanach@ut.edu](mailto:ccatanach@ut.edu) (Volleyball Parenting 101)

Claire Lessinger [Claire.lessinger@mail.usf.edu](mailto:Claire.lessinger@mail.usf.edu)

Coaches' Committee Liaison:

Mike Flynn [mike@tampaunitedvolleyball.com](mailto:mike@tampaunitedvolleyball.com)

Travel Assistant:

Monica Medvid [monica@tampaunitedvolleyball.com](mailto:monica@tampaunitedvolleyball.com)

Website and Registration and Information Coordinator:

Kevin Reynolds [kevin@tampaunitedvolleyball.com](mailto:kevin@tampaunitedvolleyball.com)

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# **TAMPA UNITED LEVELS AND EXPECTATIONS**

Tampa United will offer national, travel, regional, and AAU level teams. We will also offer leagues for beginner as well as student-athletes that cannot commit the time to a travel team. In this way, we can service all levels of volleyball in our area. Our goal is to bring the love of the game to the beginners and also train tomorrows college bound student-athlete at the highest possible level.

## **The National (Tampa) Program.....**

is designed for the athlete committed to playing volleyball in college and who is willing to make sacrifices for her progress, her team, and her sport. These teams will travel out of state and take on the best competition our country has to offer. These players have the athleticism and skill to match up against the very best prospects.

## **The Travel (United) Program.....**

is designed for the athlete who is also serious about her volleyball and who is working hard to open doors to playing in college. She also makes sacrifices for her progress, her team, and her sport. She may be looking at a wider array of colleges that may not require elite level athletic ability, skills, or commitment.

## **The Regional (Florida) Program.....**

are designed for the athlete seeking experience and a development of her fundamentals. She is very serious about competing in high school and may be open to playing once in college. These levels are appropriate for a multi-sport athlete who is unable to commit to a more extensive practice and travel schedule or who is unable or unwilling to make a larger financial commitment.

## **The League Teams.....**

are designed for the beginning to intermediate volleyball player. Leagues will be one or two nights a week and will generally run six weeks long with a short break before the start of the next session. In each six week session athletes will receive training in all six skills as well as team training.

# **Tampa United Volleyball**

## **Skill Expectations**

### **12s and 13s age division:**

Basic ball control concepts including.... movement, platform development, freeball passing, serve receive passing.

Setting and overhand passing techniques

Overhand serving.... Float serves, topspin

Basic attacking concepts.... Armswing, hand contact, footwork, tipping, and introduction of one leg attacking

Basic defensive concepts.... Positioning, movement, middle up and middle back defense, blocking footwork and hand positioning

Basic offensive concepts.... 3 contacts per side, offensive systems, understanding rotations and overlapping.

### **14s age division:**

All skills mentioned above

More specialized positional training

Intermediate to advanced defense.... Digging feel and awareness, floor defense skills

Intermediate to advanced attacking.... line and crosscourt attacking, 1<sup>st</sup> and 2<sup>nd</sup> tempo attacks, setter attacking

Intermediate to advanced serving.... Location serving

Offensive systems.... 6-2 and 5-1, attacking in an offensive scheme

Defensive systems.... rotation and read defenses

### **15s age division:**

All skills mentioned above

More advanced specialized positional training

Serving strategies, use of isolation and crossing offensive strategies, understanding match-ups, SR off higher level serving, ball pursuit and going to the floor effectively, go-to training, spread blocking, blocking positioning/technique/contact, cut shot attacking in moderation, tooling, defending behind a blocking scheme.

### **16s age division:**

Everything mentioned above

Back row attacking within the offense, jump serving, team coverage, transition attacking, offensive speed, swing hitting and cross attacking, bunch blocking, finishing blocks, channeling on defense.

### **17-18s age division:**

Everything mentioned above

Film study and advanced strategies, players taking responsibility for product on floor, problem solving, conditioning and strength training that will pave the way to success in college.

**You are only a member of Tampa United Volleyball Academy when the following criteria are met:**

**Checklist**

Once you accept a spot with us you must provide a credit card to be placed on file and pay a \$500 deposit. (Deposit subject to Florida Region commitment rules)

You sign the 2009-2010 Participation and Payment Contract

This form is due the Monday after tryouts.

You sign the Waiver/Liability Release.

You fill out the Tampa United Player Information Sheet.

You fill out a Medical Release Form and have it notarized.

(\*We will provide a notary at tryouts.)

You sign the Parent/Player Code of Conduct Contract.

You read this handbook in its entirety.

**\*OUR WEB PLATFORM WILL ASSIST YOU WITH THIS PROCESS UNDER "PLAYERS' CORNER."**

# TAMPA UNITED VOLLEYBALL PLAYER INFORMATION SHEET

*This must be filled out **completely** to be offered a roster spot.*

Athlete's Name: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Actual Age Division: \_\_\_\_\_

Athlete's Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_\_

Athlete's Email: \_\_\_\_\_

HS Team: \_\_\_\_\_ Position \_\_\_\_\_ Years Played \_\_\_\_\_ Handed L / R

This will be competed at tryouts

Height: \_\_\_\_\_ Standing Reach: \_\_\_\_\_ Jump Touch: \_\_\_\_\_

## **Mother's Information:**

Mother's Name: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

Mother's Work Phone: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_

Mother's Email: \_\_\_\_\_

Include in group email lists? YES NO

## **Father's Information:**

Father's Name: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_

Father's Work Phone: \_\_\_\_\_

Father's Cell Phone: \_\_\_\_\_

Father's Email: \_\_\_\_\_

Include in group email lists? YES NO

With whom does the athlete reside: Mother / Father / Both

The party that is responsible for payment: Mother / Father / Both

Address to mail statement if different from above:

\_\_\_\_\_

\_\_\_\_\_

**Tampa United Volleyball Academy:  
2009-2010 Participation and Payment Agreement**

I, the parent/guardian of: \_\_\_\_\_ have read this Agreement concerning the policies and practices of the Tampa United Volleyball Academy ("The Academy"). I agree, with my daughter having been selected to the team listed below, to let her join The Academy for the 2010 Volleyball Season. In agreeing to this, I understand that she cannot play for any other team in USA or AAU Volleyball without a written release from the Director of Tampa United Volleyball Academy.

**I understand that I am responsible for all fees due by the Player. I understand and agree that upon signing this Agreement and paying a deposit of \$500 (deposit subject to FL Region Commitment Rules) , I shall be financially responsible for the entire fee of \$ \_\_\_\_\_ payable as set out below. I understand that I am responsible for this entire fee once I sign this Agreement and pay the deposit, under any and all circumstances with no exceptions, regardless of whether my daughter plays the entire season, decides to leave The Academy, is dismissed due to conduct violations, or has any other reason to attempt to claim a refund.**

**I also understand that I am responsible for my daughter's transportation to all practices and tournaments.**

I understand that team travel will be dependent upon my daughter maintaining membership on a specific team, which is at the sole discretion of the Directors of The Academy. Promotions and demotions are possible depending upon development of the individual player. I understand that membership in The Academy is limited and others may have been denied a position by my daughter's acceptance.

I understand that equal opportunity to participate will be provided during practices, however, on court time at tournaments is not guaranteed, but is determined by The Academy staff and coaches.

I agree that, if I am on a payment schedule, The Academy is entitled to receive the entire contract balance due as liquidated damages if I am more than 14 days late on any payment due. In this event, if this matter is referred to an attorney and/or collection agency, I agree to pay, over and above my liabilities, reasonable collection fees, attorney fees, and court costs. Venue for all actions under this Agreement shall lie in Hillsborough County, Florida.

I hereby warrant, represent, and agree that my daughter is in good physical health and that she has no disability, impairment, or ailment that prevents her from engaging in active or passive exercise and that she has no condition that would cause such exercise to possibly be detrimental to her health, safety, comfort, or physical condition. The Academy strongly recommends that your daughter consult her own physician before beginning participating in our program.

This agreement is not assignable or transferable without prior approval of Tampa United Volleyball Academy.

This agreement is governed by the laws of the State of Florida and supersedes all prior oral or written representations, or communications and may only be modified or amended by a written supplement signed by the me, another parent or spouse or legal guardian, and an authorized representative of Tampa United Volleyball Academy.

READ, ACKNOWLEDGED, and AGREED TO this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Parent/Guardian Printed Name: \_\_\_\_\_

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

Parent/Guardian Printed Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_, Zip \_\_\_\_\_

Fee Payable As Follows: \$500 deposit immediately and 1/3 balance charged to credit card on dates TBA.

**EVERYONE must have a credit card to be kept on file for payments unless you pay the full tuition when you accept the spot on a team.**

**(Non-negotiable)**

**Please circle one Visa / MC / AMEX / DISC**

**Credit Card # \_\_\_\_\_**

**EXP: \_\_\_\_\_ / \_\_\_\_\_ ZIP: \_\_\_\_\_**

# Waiver/Liability Release

Participant of Tampa United Volleyball Academy, Inc.

**Printed Player Name:**

I acknowledge that volleyball or any sporting event is an extreme test of a person's physical and mental limits and that my participation in a volleyball event can cause potential death, serious injury, or property damage.

With a full understanding of the potential risks, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE NAMED PERSONS OR ENTITIES listed below or others, and assume full responsibility for my participation. I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns:

- a) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death or personal injury or damages of any kind which arise out of or relate to my traveling to and from or my participation in any volleyball event,
- b) I AGREE NOT TO SUE any of the named persons or entities listed below for any of the claims or liabilities that I have waived, released or discharged herein; and
- c) I INDEMNIFY AND HOLD HARMLESS the named persons or entities mentioned below from any claims made or liabilities assessed against them as a result of my actions.

NAMED PERSONS OR ENTITIES: Tampa United Volleyball Academy, Inc. and its Regional Volleyball Associations, tournament directors, sponsors, and the owners, officers, directors, employees, sub-contractors, representatives, and agents of any of the above.

Player's Signature (regardless of age ) Date Signed:

If player is under 18 years of age, a parent or guardian must execute, in addition to the foregoing Waiver/Liability Release Form, the following, for and on behalf of the minor. The undersigned parent and natural guardian or legal guardian of the player executes the foregoing Waiver/Liability Release Form for and on behalf of the minor named herein. I hereby bind myself, the minor and all other assigns to the terms of the Waiver/Liability Release Form. I represent that I have legal capacity and authority to act for and on behalf of the minor named herein, and I agree to indemnify and hold harmless the named persons or entities named in the Waiver/Liability Release Form for any claims or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the Waiver/Liability Release Form.

Parent/Guardian's Signature Date Signed:

\_\_\_\_\_  
Printed Name of Parent/Guardian