

Fort Worth Fire Volleyball Club 2024-2025 Offer Acceptance Agreement

For the 2024-2025 Season in the North Texas Region, this letter is to certify that I

_____am accepting the offer from Fort Worth Fire
Volleyball Club.

Team Name: Fort Worth Fire _____Purple, White, Black, Grey (circle one)

Age Division: _____

I _____(Participants Family), agree to pay the initial deposit of
\$500.00 upon accepting offer. Please submit payment listed online and then set up your
remaining payments.

Athletes/Participants Printed Name: _____

Athletes Signature: _____

Date: _____

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date: _____

Director Signature: _____Date: _____