



JVA INSURED TOURNAMENT COACHES' SIGN-IN FORM

Name of Event: _____ Date(s): _____

This tournament is insured by JVA. It is required that each member of the team have signed **JVA Waiver of Liability Form** and a **JVA Medical Waiver and Release Form*** electronically and that it can be accessed through the JVA registration.

If an individual is injured during participation in this event, it is the coach's responsibility to secure a "**JVA Incident Report**" from the Tournament Director. The form should be completed and retained by the Tournament Director. It is advised that the coach keep a copy for the club records. Medical Claims for insurance coverage cannot be honored without an Incident Report form. A Medical Claim form can be requested from Lisa Wielebnicki via email at lisa.wielebnicki@jvavolleyball.org.

By signing this form, you are taking responsibility that anyone on your bench is on your submitted roster. Also, you are agreeing that you have completed all requirements of the JVA Background Screen and JVA Safety Policy.

The coach assumes responsibility to have access to the above-named forms at all times.

*A USAV Medical Waiver and Release Form is acceptable.

Club Name _____

Team Name _____

Coach Printed Name _____

Coach Signature _____

Dated _____

For more information on the Junior Volleyball Association (JVA) go to
www.jvavolleyball.org

Contact with Questions:
Lisa Wielebnicki, JVA Director of Member Development
lisa.wielebnicki@jvavolleyball.org

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