



## 2019-2020 MEVC Chaperone Responsibilities

### *USA VOLLEYBALL – CHESAPEAKE REGION CHAPERONE RESPONSIBILITIES*

Thank you very much for volunteering to be a junior team chaperone! As a chaperone, you are assuming certain responsibilities for the welfare of the players under your care, custody and control. To assist you in knowing what your responsibilities are, we have created this information sheet for you. Please read and discuss these responsibilities with the team coach or club director. If you understand and accept these responsibilities, please enter your name, the name of the team for which you will be a chaperone, and your DOB (this will serve as your signature) at the bottom of this form.

In order to become a chaperone you must –

1. **Register online with USA Volleyball (USAV)/Chesapeake Region Volleyball Association (CHRVA).** Instructions for completing registration are available at - <https://www.chrva.org/page/show/1263504-chrva-registration-information>.
2. **Successfully pass a background screening.** Please see <https://www.chrva.org/page/show/3944604-background-screening-information> for more information. The USA Volleyball Background Screening policy is available at <https://www.teamusa.org/usa-volleyball/education/background-screening>.
3. **Complete SAFESPORT training.** Please follow instructions at <https://www.chrva.org/page/show/1507390-safesport>.

As a chaperone, I understand and accept responsibility for the following:

- At tournaments I understand that it is my responsibility to assist the coach(es) in the supervision of the players, and in the coach's absence, I will be responsible for monitoring and overseeing the actions of the players I am supervising. If I must leave the tournament facility at any time, I will arrange for another rostered chaperone to assume my duties.

- As a tournament chaperone, I may sign the team roster, verifying the team's presence and introduce myself to the tournament director, should the coach be unavailable.
- If for any reason I feel I am unable to carry out any of my responsibilities as a chaperone, I will personally contact the team coach or club director and advise him/her of my circumstances.
- I will do everything that is reasonable and prudent to ensure the safety of the players while performing any chaperone duties.
- As a chaperone, I understand that I am working under the direction of the team, Maryland Exclusive Volleyball Club (MEVC), Chesapeake Region Volleyball Association (CHRVA), or USA Volleyball (USAV).
- I will have a meeting with the players I am chaperoning to discuss the following information:
  - Room accommodations – players' responsibilities and conduct (if applicable)
  - Curfew
  - Check-in requirements if the players are going to leave the hotel (if applicable)
  - Review of departure times and team activity agenda times
  - Drug, alcohol, and tobacco restrictions
  - Team meals (if applicable)
- If transporting players to and from an event (team practice, tournaments), I will obey all traffic laws and will not take any driving risks that will place the players or me in a harmful situation. All players as well as myself will wear seatbelts while in the automobile.
  - If using my personal automobile for transporting players, I understand that I am responsible for any accidents or injuries to my automobile, myself or to the players.
  - I agree to have automobile liability insurance in the amount of \$300,000 or more covering the automobile I will use to transport players.
  - I agree not to transport more players than my automobile has seatbelts for.
- I will refrain from using alcoholic beverages while conducting my chaperone responsibilities. I will absolutely not drink and drive myself or any players while acting as a chaperone. If for any reason I feel impaired to chaperone, drive, or carry out any of my responsibilities I will personally contact the team coach or manager and advise him/her of my impairment.
- I will do everything that is reasonable and prudent to insure the safety of myself and the players while performing any chaperone duties.

- As a chaperone, I understand that I am working under the direction of MEVC, CHRVA and USAV. Any *General Liability* insurance available to the MEVC, CHRVA or USAV (excluding auto insurance) is also made available to me while working on behalf of or at the direction of MEVC, CHRVA or USAV. I understand that I may be personally responsible and liable for any of my actions that fall outside the scope of authority granted to me by MEVC, CHRVA, and USAV.

Chaperone Name: \_\_\_\_\_ Date: \_\_\_\_\_

Chaperone Signature: \_\_\_\_\_ Team: \_\_\_\_\_