



## APPLICATION 2026/27

### **PROGRAM DATES:**

Semester 1 - September 2026 through January 2027, as per SD#22 schedule.

Students will be in the Academy daily for two (A/B or C/D) of their four blocks.

Students will generally be placed dependant on grade level. Some exceptions may be made to balance the group numbers, or to ensure students are placed at proper development level.

### **Academy Junior Stream – Block A/B**

\*Grades to be determined by enrollment numbers. In past years we have not been able to accept grade 8 students, but this may change in 2026/27.

### **Academy Senior Stream – Block C/D**

\*Grades to be determined by enrollment numbers. In past years, this has been grades 11 and 12.

*\*Please note these blocks when you are planning your academic schedule.*

### **INSTRUCTORS:**

All on-court staff are certified coaches with Volleyball Canada, and Safe-Sport trained.

All off-court instruction – including fitness, strengthening, nutrition and so on, will be provided by certified professionals.

Classroom instruction will be monitored by a high school level SD22 teacher.

Approximately 15-hours of instruction per school week and 16 weeks of instruction.

### **PROGRAM ELIGIBILITY & CAPACITY:**

The program is open to grade 8-12 students.

The Academy will accept approximately 30 students per Stream. Approximately 60 total.

Academy Directors will ensure appropriate placement in regards to developmental level, and numbers in each Stream.

### **COURSE CREDITS:**

Students will receive Physical Education (P.E.) grade credit, and Sport Development grade credit via vLearn.

### **TRANSPORTATION:**

Transportation to and from Sky Gateway #204, 5000 Silver Star Road will be the responsibility of the parent and student.

Car-pooling will be encouraged to and from each school.

### **EQUIPMENT:**

Students are responsible to provide quality volleyball footwear, socks, shorts, and shirt.

An Academy Kit is part of the tuition requirement.

All volleyball specific and training equipment will be provided by the Academy.



## SELECTION TO THE ACADEMY

Students must be in good standing with their schools, and volleyball associations.

Students should have volleyball experience for the Academy, but this is not mandatory.

### APPLICATION DEADLINE:

Applications are to be received no later than **Tuesday March 31<sup>st</sup>** with a post-dated cheque.

The March 31<sup>st</sup> date is to provide enough time for students to ensure the Academy works with their academic schedule.

### ACCEPTANCE DATE:

Acceptance notices will start to be sent out after **Tuesday, March 31<sup>st</sup>**.

The Academy will reach out to each applicant. Those we are not able to enroll will also be contacted via email.

Waitlist: A priority waitlist will be formed if Academy is full.

Deposit cheques and e-Transfers will only be deposited for those *accepted and confirmed*.

NB: Due to the demand of the program, deposit funds are 100% non-refundable once the students' *acceptance is confirmed* with parents and deposit cheque/payments have been finalized (see Parent/Guardian Financial Pledge document).



## PROGRAM TUITION

### TUITION

Program: \$1850.00 (+5% GST): **\$1942.50**

### DEPOSIT:

Cheque or e-Transfers dated **March 31<sup>st</sup>** of **\$262.50** (\$250 + 5% GST) with all Applications. Applications will not be accepted without deposit cheque, or e-Transfer.

### TUITION SCHEDULE (IF PREFERRED):

*\*Full tuition paid in advance is always appreciated: **\$1942.50***

Mar 31 Deposit:	<b>\$262.50</b> (\$250 +5% GST) Due with Application (e-Transfer or cheque)
August 1:	<b>\$420.00</b> (\$400 +5% GST)
September 1:	<b>\$420.00</b> (\$400 +5% GST)
October 1:	<b>\$420.00</b> (\$400 +5% GST)
November 1:	<b>\$420.00</b> (\$400 +5% GST)

Post-dated cheque payments on dates above payable to "Beyond Sport".

E-Transfer: If sending Deposit via e-Transfer, please **WAIT UNTIL THE END OF MARCH TO SEND**, otherwise it will expire.

Send payments **on dates above** to: [troy@beyondsport.com](mailto:troy@beyondsport.com) Password "volleyball"

\*Should a student not be accepted to Academy, deposit cheques will not be cashed, and eTransfers will not be deposited.

\*\*Cheques or e-Transfers deposited after each date above are 100% non-refundable due to program incurred costs (see Financial Pledge).

**Please deliver your application (pages 4-9) and deposit to the following:**

### MAIL:

Troy Lorenson  
Beyond Sport Inc.  
7835 Jordashe Road  
Vernon BC, V1B 3N4

### APPLICATION QUESTIONS:

Troy Lorenson  
250-550-8769  
[troy@beyondsport.com](mailto:troy@beyondsport.com)



## CONTACT INFORMATION

**(PRINT & RETURN)**

### STUDENT PERSONAL INFORMATION:

Student Name: \_\_\_\_\_  
D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)

Grade (September 2022): \_\_\_\_\_  
Student Email: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

**\*SD22 REQUIRES ALL PARENTS/LEGAL GUARDIANS TO BE ON RECORD**

Parent/Guardian 1 Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Parent/Guardian 1 Email: \_\_\_\_\_

Parent/Guardian 2 Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Parent/Guardian 2 Email: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION:

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

Are there any special needs or medical conditions we should be aware of (circle one):

NO      YES

If Yes, please explain:

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## **PARTICIPANT INFORMATION**

**(PRINT & RETURN)**

2026/27 Planned SD22 High School: \_\_\_\_\_

Entering Grade (as of September 2026): \_\_\_\_\_

School 2025/Club 2026 Volleyball Teams: \_\_\_\_\_

\_\_\_\_\_

School Coaches Reference (past or current): \_\_\_\_\_

\_\_\_\_\_

Club Coaches Reference (past or current): \_\_\_\_\_

\_\_\_\_\_

Position Played or Preferred (if known): \_\_\_\_\_

\_\_\_\_\_

### **ATHLETE KIT:**

T-Shirt Size (adult unisex) for Fall 2025 (circle one):                    XL            L            M            S

Hoodie Size (adult unisex) for Fall 2025 (circle one):                    XL            L            M            S

Sweatpants Size (adult unisex) for Fall 2025 (circle one):                    XL            L            M            S



## **STUDENT QUESTIONNAIRE**

**(PRINT & RETURN)**

Why do you want to attend the Beyond Sport Volleyball Academy?

What are your longer-term volleyball aspirations?

What are your volleyball aspirations for the coming season?

List the three highest priority skills you believe you need to focus on.

What is your most memorable volleyball experience to date?

What can you tell us about your character that would bring value to this program?



## CODE OF CONDUCT

### (PRINT & RETURN)

Your acceptance into Beyond Sport Volleyball Academy comes with a commitment to behave in an appropriate manner at all times. By signing this document, you attest to have read and understood your obligations to your school, teachers, instructors, as well as any facilities we may use.

- I will provide my full attention and effort during all school and volleyball activities.
- I will not use profanity or make derogatory comments, in person or online.
- I will take full responsibility for my own actions and maximize the safety of all others.
- I will not smoke, chew tobacco, drink alcohol, vape, or take any illegal substances.
- I will respect my instructors, teachers, fellow students, and facility staff.
- I will arrive to classes and court sessions on time and prepared to learn.
- I will submit my assignments on time and done to the best of my ability.
- I will advise the school and academy instructors in advance when I will be absent.
- I will treat my own property and that of all others with respect.
- I will follow the rules of my school, the Academy, and the facilities I use.

**If you agree please provide your name and signature below:**

Student Name (please print): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)

Parent/Guardian 1 Signature: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)

Parent/Guardian 2 Signature: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)



## **PARENT/GUARDIAN FINANCIAL PLEDGE**

**(PRINT & RETURN)**

The Beyond Sport Volleyball Academy (BSVA) operates on a strict budget. BSVA makes significant investments and commitments up front to provide the proper facilities, top-level instruction, and leading-edge training tools. Our goal is to bring you a remarkable program at the best possible delivered price.

Student cancellations will directly affect our ability to deliver on our promise to you and to the program. It is our expectation, that as a fully committed supporter of the BSVA, you recognize and accept your full financial obligations up front.

The BSVA, and other associated sports activities outside BSVA, all come with injury risk. I fully accept 100% of that risk on behalf of my child. I recognize and accept that BSVA cannot be held financially accountable for this injury risk. I understand that I cannot hold the BSVA responsible for any financial re-imbursement if I decide to withdraw my child from the program due to any reason. Whether that be injury, illness, re-location, choice to attend another Academy or for any other reason.

If I withdraw my child from this program between March 31st and November 1st, 2026, I fully accept that I forfeit the full amount of all cheques that have been cashed or payments made up to, or at that time. I understand and accept that absolutely no refunds will be provided.

Any loss or charge assigned the Academy because of confirmed damage or theft caused by my child will be covered in full by me.

By signing this Parent/Guardian Financial Pledge you attest to have read, fully understood, and accept your full financial obligations to the Beyond Sport Volleyball Academy.

**If you agree please provide your name and signature below:**

Student Name: \_\_\_\_\_

Parent/Guardian 1 Name (print): \_\_\_\_\_

Parent/Guardian 1 Signature: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)

Parent/Guardian 2 Name (print): \_\_\_\_\_

Parent/Guardian 2 Signature: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)



## PHOTO & VIDEO RELEASE WAIVER

**(PRINT & RETURN)**

**DESCRIPTION: PHOTO AND VIDEO RELATED TO BEYOND SPORT INC.**

Photography and videography are a key component of our work at the Beyond Sport Volleyball Academy, whether to do skill analysis, capture our academy culture, or promote our program to future students. Therefore, we ask your permission to use these images:

*I give Beyond Sport Inc. the right to take photographs and video of me in connection with all Beyond Sport Inc./Beyond Sport Volleyball Academy related practices & training sessions.*

*I also grant them permission to use my image or likeness in a photograph, video, or other electronic means, for Beyond Sport Inc./Beyond Sport Volleyball Academy promotional purposes such as but not limited to their website and social media accounts.*

*I, the undersigned, have read and fully understood the terms and conditions of signing this photo release waiver.*

Student-Athlete Name: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (M/D/Y)

**I also certify that I am:**

(  ) at least 18 years of age, or,

(  ) below 18 years of age but have acquired the consent of my parents and guardians whose signature/s can be found below.

Student Signature: \_\_\_\_\_

Parent/Guardian 1 Name: \_\_\_\_\_

Parent/Guardian 1 Signature: \_\_\_\_\_

Parent/Guardian 2 Name: \_\_\_\_\_

Parent/Guardian 2 Signature: \_\_\_\_\_