



Partial Payment Plan Agreement

It is understood by all parties of this agreement that meeting the financial requirements for participation within the Tallahassee Comets Girls Basketball Program may be difficult for parents/guardians of the participant to fund all at once. With this mind, the Tallahassee Comets, Inc. agrees to accept and the parents/guardians of the participating player agree to pay as per the partial payment plan schedule noted below.

- The partial payment plan schedule has been developed in accordance with the **2009 tournament schedule**. All funds must be on deposit to the Comets to ensure participation. Adherence to the partial payment plan schedule is necessary to ensure the player's and team's participation in scheduled tournament events for the Tallahassee Comets Girls Basketball Program.
- In the event the participating player's parents/guardians do not adhere to the above payment schedule as stipulated, the participating player may be subject to termination from the Tallahassee Comets and scheduled tournament events of teams may be cancelled by the Tallahassee Comets.

Partial Payment Plan Schedule

Installment Payments	Associate (Non-Travel)	AAU/YBOA Teams (Exposure)	2009 Due Dates
1 st Installment	\$100.00	\$250.00	February 26 th
2 nd Installment	\$100.00	\$250.00	March 30 th
3 rd Installment	\$100.00	\$250.00	April 30 th
4 th Final	\$100.00	\$250.00	May 28 th
Totals:	\$400.00	\$1,000.00	

Handbook Acceptance

I acknowledge that I have received, read and discussed with my daughter the information in the Player/Parent Handbook. I understand all of the policies as outlined in the handbook and agree to abide by the rules of the organization. A player may not begin the season with the Comets until all of the handbook's forms are signed and submitted to the President. **Additionally, each player must provide a photocopy of her birth certificate, most recent report card and health insurance card before she will be eligible to start the Comets season.**

Signature of Parent/Legal Guardian for the below indicated participant constitutes understanding and agreement to abide by this Code of Conduct as set forth above.

Date: _____

Participant's Printed Name: _____ Signature: _____

Parent/Legal Guardian Printed Name: _____ Signature: _____