

US Youth Soccer



Please Type or Print Clearly - Do Not Staple

A Proud Member of US Soccer

Please Type or Print Clearly - Do Not Staple

Affliated with the Federation Internationale de Football Association

I. APPLICATION TO TRAVEL

Team Name	Age Group U	Type of Team (se	ee reverse side)_		B / G (circ	le one)
_eague or Home Association	State Association	or Affiliate	Team	Departure D	ate.	
Team Manager or Coach			Telepho	one ()	-	w
Address	E-ma	iil	-01-100	()	-	Н
City	State Zip		* **		-	FA
i state that during the dates below, the team sustained on the field and during transportation.	n has no conflicting playing commi	itments at home. All player	ers are fully insured	to cover them	against injurie	s
Signature of Team Manager or Coach	2000 <u>1</u>			Date		
	II. TRAVEL TO A esting permission to travel to a	a tournament, you mus		tion.		
A copy of the approved Hosting Agre						
We request approval to play in the						
Tournament Director or Contact Person			•	e <u>()</u>		
Address						
City State	Zip Count	iry		()		FAX
If you are requesting A copy of the approved hosting form about the tournament or games must be attact the tournament or games on to play games (and attach a separate sheet, if necessary):	ched.	of the official brochure,	, pamphlet, invita	ation, or other		
OPPONENT		CITY	STA	TE OR COU	NTRY	
1						
2						
3						
Hosting Organization			· · · · · · · · · · · · · · · · · · ·			
Contact Person					-	v
Address	E-mail			()		_ <u>'</u>
City State	Zip Country			()		
STATE ASSOCIATION OR AFFILIATE	APPRO (For Official	Use Only)	Date		Alexandra de la constanta de l	79-1-1- V46-1
Ву	The state of the s		Title			
In granting this permission to travel, neither US Y property sustained in the course of the approved even DISTRIBUTION: ?Team (White) / ? State Association/Af	ent.	itions or Affiliates shall be	liable for transport	ation, lodging, o	or injury to pers	sons or