



## FOREIGN TEAM TOURNAMENT REGISTRATION SUMMARY FORM

TOURNAMENT	TEAM NAME
DATE(S)	DIVISION OF PLAY
REGION	NATIONAL FEDERATION

	ALL	ALL	Coaches Only	Team
Roster (Last Name, First Name) <i>Include Players, Coaches and Support Staff</i> <i>If adding players to roster after 1<sup>st</sup> tournament, use 2<sup>nd</sup> page</i>	Registration Form	Proof of Age	Coaching Certification	\$100 Insurance Payment
<b>Team's \$100 Foreign Team Insurance</b>				
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

**READ AND SIGN ALL FORMS. THE PARTICIPANT'S AND PARENT/GUARDIAN'S SIGNATURES ARE REQUIRED ON ALL FORMS.**

<ol style="list-style-type: none"> <li>1. All persons listed on the roster must provide each of the following forms:               <ul style="list-style-type: none"> <li>➤ Foreign Participant Registration Form (all signatures are required)</li> <li>➤ Proof of Age</li> </ul> </li> <li>2. Junior Rostered Head Coaches must provide proof of coaching certification equivalent to IMPACT</li> <li>3. Canadian teams must provide Letter of Good Standing from Volleyball Canada to qualify for the insurance fee waiver. (Open National Championships- proof of 24-hour medical insurance coverage while in the United States will work in place of Letter of Good Standing)</li> <li>4. Tournament Director shall send originals of all forms and the insurance fee(s) to the National Office. Make checks payable to USA Volleyball (\$100 per team).</li> <li>5. Copies of all documentation should be retained by the Foreign Team and the Tournament Director/Region.</li> </ol>
Tournament Director Signature _____ Date _____
National Office – Date received _____ Date _____



**FOREIGN TEAM TOURNAMENT REGISTRATION SUMMARY FORM**

TEAM NAME
DIVISION OF PLAY
NATIONAL FEDERATION AFFILIATION

Additional tournaments and additions to the roster (after participation in the first tournament) should be listed below.

TOURNAMENT \_\_\_\_\_  
 DATE(S) \_\_\_\_\_ REGION \_\_\_\_\_

TOURNAMENT \_\_\_\_\_  
 DATE(S) \_\_\_\_\_ REGION \_\_\_\_\_

TOURNAMENT \_\_\_\_\_  
 DATE(S) \_\_\_\_\_ REGION \_\_\_\_\_

TOURNAMENT \_\_\_\_\_  
 DATE(S) \_\_\_\_\_ REGION \_\_\_\_\_

TOURNAMENT \_\_\_\_\_  
 DATE(S) \_\_\_\_\_ REGION \_\_\_\_\_

TOURNAMENT \_\_\_\_\_  
 DATE(S) \_\_\_\_\_ REGION \_\_\_\_\_

		<b>ALL</b>	<b>All</b>	<b>Coaches Only</b>	<b>Insurance Fee</b>
Date added	Roster (Last Name, First Name) Includes Players, Coaches and Support Staff	Registration Form	Proof of Age	Coaching Certification	\$10/addition
	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
	7.				
	8.				
	9.				
	10.				