

TRAVEL REQUEST

UNITED STATES AMATEUR SOCCER ASSOCIATION - REGION III

www.ntxsoccer.org

Revised 8/02

| | |
|-------------------------|--|
| Tournament Name: | |
|-------------------------|--|

| | |
|-------------------|--|
| Team Name: | |
|-------------------|--|

An affiliate member of the

| | |
|----------------------------------|---|
| State Soccer Association: | NORTH TEXAS STATE SOCCER ASSOCIATION |
|----------------------------------|---|

Requests permission to play in a state approved tournament sponsored by:

| | |
|----------------------|--|
| Sponsor Name: | |
|----------------------|--|

| | |
|--|--|
| State Amateur Soccer Association: | |
|--|--|

| | | |
|-----------------------------|-------------|--|
| Tournament Director: | Name | |
|-----------------------------|-------------|--|

| | |
|------------------------|--|
| Street Address: | |
|------------------------|--|

| | | | | | |
|--------------|--|---------------|--|-------------|--|
| City: | | State: | | Zip: | |
|--------------|--|---------------|--|-------------|--|

| | | | |
|-----------------------|--|-----------------------|--|
| Phone # (Work) | | Phone # (Home) | |
|-----------------------|--|-----------------------|--|

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|--------------------------|--------------|--|------------|--|--------------------------------|
| Tournament Dates: | Start | | End | | Location: (City, State) |
|--------------------------|--------------|--|------------|--|--------------------------------|

| | |
|-----------------|--|
| Remarks: | |
|-----------------|--|

Signature of team Coach/Mgr. _____

| | |
|--|--|
| Street Address of team Coach/Mgr. | |
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| | |
|-----------------------------|--|
| City, State and Zip: | |
|-----------------------------|--|

| | | | |
|----------------------|--|----------------------|--|
| Phone: (work) | | Phone: (home) | |
|----------------------|--|----------------------|--|

APPROVALS FOR TRAVELING TEAM

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|--|---|
| Name of League of Traveling Team: | North Texas Women's Soccer Association |
|--|---|

League Registrar Signature: _____

Signature of League Registrar acknowledges that team requesting to travel, made up of its individual players, is in good standing with the above-mentioned League of which it is a member.

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|---|---|
| State Association: (of traveling team) | North Texas State Soccer Association |
|---|---|

| | | | |
|-----------------|--|---------------|---------------------|
| Address: | 1740 S I-35, Suite 105 Carrollton, TX 75006 | Phone: | 972-323-1323 |
|-----------------|--|---------------|---------------------|

State Registrar's Signature: _____

Signature by the State Association registrar acknowledges that the team requesting to travel, made up of its individual players, is in good standing with the State Association of which it is a member.

State Assn. President's Signature: _____

Signature by the State Association President acknowledges that the team requesting to travel, made up of its individual players, is in good standing with the State Association of which it is a member.

| | | | |
|--------------|--------------------|---------------|---------------------|
| Name: | John Sutter | Phone: | 972-323-1323 |
|--------------|--------------------|---------------|---------------------|

| | | | | | | | |
|----------------|-------------------------------|--------------|-------------------|---------------|-----------|------------------|--------------|
| Address | 1740 S I-35, Suite 105 | City: | Carrollton | State: | TX | Zip Code: | 75006 |
|----------------|-------------------------------|--------------|-------------------|---------------|-----------|------------------|--------------|

Host State Approval: (State, Assn.) _____

APPROVAL BY: _____ Title: _____

This form **MUST** be accompanied with a **TEAM ROSTER** for the purpose of verifying all player/team eligibility. Please keep a copy of this signed form with your player passes to avoid any questions about your players during this tournament. This travel request cannot be approved without a team roster.