



Approval to Travel to Sanctioned Tournaments Outside Of Alberta

By virtue of the signatures below, the following team is approved to travel outside of Alberta to compete in the sanctioned tournament below:

Team Name: _____

District Association: _____ Age and Tier: _____ M F

Coach: _____ Manager: _____

Address: _____ Address: _____

Phone #: _____ Phone #: _____

Email: _____ Email: _____

Tournament Name: _____

City, Province/State/Country: _____

Address: _____

Phone #: _____ Travel Dates: _____

Signatures of Approval

Club President *(if applicable)*: _____ District Association: _____

Roster Included and Approved by District: Alberta Soccer Association: _____

| |

| Alberta Soccer Administrative Fees <i>(incl. GST)</i> | |
|---|-----------------|
| Two weeks (or more) before travel | Free |
| < 2 weeks before travel | \$100.00 |
| < 72 hours before travel | \$250.00 |



Alberta Soccer Association

Governing Body of Soccer in the Province of Alberta

9023 – 111 Avenue

Edmonton, AB T5B 0C3

(p) 780.474.2200 (f) 780.474.6300

www.albertasoccer.com

TRAVEL PERMIT ADDENDUM

Travel Application for participating in an Exhibition match series and/or Training camp

This form MUST be completed if your travel plans include exhibition match series and / or training camp outside of Alberta.

Description (Team name, Club, Age, Tier): _____

Name (Coach or Team Manager): _____

Third Party Travel Manager (if applicable): _____

Football Association (Provincial or State): _____

Address of Training Camp w/ Dates: _____

Opponents for Exhibition matches including Addresses & Dates of Matches

Match 1: _____

Match 2: _____

Match 3: _____

Match 4: _____

Match 5 or more:

ALBERTA SOCCER
ASSOCIATION SIGNATURE OF
AUTHORISATION

Edmonton, Alberta, Canada



ALBERTA SOCCER ASSOCIATION

Travel Roster

District Association: _____

Team Details

Tournament Name: _____
 Team Name: _____
 Gender: _____

Primary Contact

Name: _____
 Cell Phone #: _____
 E-Mail: _____

Competition Level

Age Group: _____
 ASA Tier: _____

Player Details

| | Surname | First Name | Address | Postal Code | Mo. | Day | Year | Phone # | Registration # |
|----|---------|------------|---------|-------------|-----|-----|------|---------|----------------|
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Team Staff Details

| | Surname | First Name | Address | Postal Code | Mo. | Day | Year | Coaching Cert. | CIPC Expiry |
|----------|---------|------------|---------|-------------|-----|-----|------|----------------|-------------|
| COACH | | | | | | | | | |
| A. COACH | | | | | | | | | |
| A. COACH | | | | | | | | | |
| MGR | | | | | | | | | |

BY SIGNING THIS ROSTER I ACKNOWLEDGE THAT ALL PLAYERS AND COACHES LISTED ARE REGISTERED
 AND IN GOOD STANDING WITHIN OUR CLUB/DISTRICT. ALL GUEST PLAYERS HAVE BEEN DULEY INDICATED
 AND LETTERS OF RELEASE ARE INCLUDED WITH THIS APPLICATION.

Team/Club Signature: _____

District Signature: _____

Provincial Signature: _____