

CODE:



TEAM REGISTRATION

[illegible]

TEAM MANAGER

1

Signature

HEAD COACH

2

Signature

OFFICIALS 7 AND 8 ARE ONLY ACCREDITED IF NECESSARY PAYMENTS TO THE ORGANIZER HAVE BEEN MADE

3 ASSISTANT COACH

4 DOCTOR

5 PHYSIOTHERAPIST

6 TRAINER

7 JOURNALIST/ STATISTICIAN

8 SUPPORT STAFF

9 SUPPORT STAFF

--

--	--

15

0

15

0	
---	--

15

--

CHOICE OF UNIFORMS

1	
---	--

2	
---	--

3	
---	--

**THIS FORM MUST BE PRESENTED BY THE TEAM TO THE NORCECA
DELEGATE DURING THE PRELIMINARY INQUIRY**

OH= OUTSIDE HITTER / MB= MIDDLE BLOCKER / OP= OPPOSITE PLAYER / L= LIBERO / S= SETTER