

NOTE: The Application to Travel form on the following page can be completed on your computer (using Adobe Acrobat or the free Adobe Reader), then printed and signed.

## **MSYSA DOMESTIC TRAVEL POLICY**

### 1. Travel to tournaments sanctioned by US Youth Soccer State Associations

#### A. Tournaments sanctioned by Region 1 State Associations (but not including New Jersey):

- Application to Travel and approved Guest Player forms are not required
- Teams are covered by MSYSA supplemental medical insurance
- Registration is still required for Non-Rostered Guest Players
- Guest players from other states require permission from other association and MSYSA

#### B. Tournaments sanctioned by New Jersey and Region 2, 3, and 4 State Associations:

- Application to Travel and approved Guest Player forms are required
- Teams are covered by MSYSA supplemental medical insurance
- Registration is still required for Non-Rostered Guest Players
- Guest players from other states require permission from other association and MSYSA

**A Directory of State Associations by Region is available at:  
<http://www.usyouthsoccer.org/aboutus/StateAssociationDirectory.asp>**

### 2. Travel to tournaments **not** sanctioned by a US Youth Soccer State Association

- Teams are not covered by MSYSA supplemental medical insurance
- MSYSA does not provide any tournament-specific paperwork approvals; this includes registration of Non-Rostered Guest Players and/or approval of out of state guest players
- MSYSA does not prevent teams from participating in this type of tournament, nor penalize teams that choose to do so

## **DEFINITIONS OF TYPES OF TEAMS**

**Source Document: US Youth Soccer Policy on Hosting Tournaments or Games  
Adopted March 4, 2007**

(Place corresponding type code in appropriate space the Application to Travel.)

*(In the first line of Section I of the Application)*

### **SELECT TEAMS** (teams formed by a selection or tryout process):

- S1:** generally a team which competes at the highest level of play in a state or region
- S2:** generally a team which competes at other than the highest level of play in a state or region
- S3:** generally a team which competes in a local area or state

### **TOURNAMENT SELECT TEAMS**

- S4:** a team which is put together for the sole purpose of playing in a tournament or other sanctioned non-league competition, whose roster includes select players who are members of one club.

### **RECREATIONAL TEAMS**

- RT:** a team which was formed in a random nature without regard to players' abilities.



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Please Type or Print Clearly

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I. APPLICATION TO TRAVEL

Everyone requesting permission to travel must fill out this section.

Boys Girls

Team Name Age Group U- Type of Team (see Definitions)
League or Home Association State Association or Affiliate MSYSA (MD) Team Departure Date
Team Manager or Coach Telephone M / W
Address E-mail H
City State Zip FAX

I state that during the dates below, the team has no conflicting playing commitments at home. All players are fully insured to cover them against injuries sustained on the field and during transportation.

Signature of Team Manager or Coach Date

II. TRAVEL TO A TOURNAMENT

If you are requesting permission to travel to a tournament, you must fill out this section.

A copy of the approved Hosting Agreement or official brochure for this tournament must be attached.

We request approval to play in the Tournament, to be held in
during the dates of through

Tournament is Sanctioned by (State Association Name, or Country if foreign travel):

Tournament Director or Contact Person Telephone M / W
Address E-mail H
City State Zip Country FAX

III. TRAVEL TO PARTICIPATE IN GAMES

If you are requesting permission to travel to participate in games, you must complete this section.

A copy of the approved hosting form or, if outside the US, a copy of the official brochure, pamphlet, invitation, or other applicable material about the tournament or games must be attached.

We request permission to play games between the dates from to in the following locations (and attach a separate sheet, if necessary):

Table with 3 columns: OPPONENT, CITY, STATE OR COUNTRY. Rows 1, 2, 3.

Hosting Organization

Contact Person Telephone M / W
Address E-mail H
City State Zip Country FAX

APPROVAL

(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Maryland State Youth Soccer Association Date

By Title

In granting this permission to travel, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.