



Soccer Rhode Island

35 Belver Avenue, Room 248
North Kingstown, Rhode Island 02852
Tel: 401.294.8474 Fax: 401.294.8406
www.soccer-ri.com



In-State Travel Application and Insurance Record

Association Name: _____ Age Division: _____

Coach Name: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

I am aware of this team's request to travel/participate in an In-State tournament or scrimmage. I certify that all participants are in good standing and affiliated with our association.

Association Signature: _____

Title: _____

Date: _____

We request permission to travel to:

Host/Facility: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date(s) of Travel: _____

Submit travel request to state registrar along with three copies of the completed rosters. Each association team attending an event must pay a late fee (if applicable) before this form can be processed.

Late Fees: More than 30 days in advance – no late fee charged
Less than 30 days but more than 15 days - \$25 charge
Less than 15 days but more than 7 days - \$50 charge

Only those teams submitting written proof of late acceptance can receive authorization to travel on requests submitted with less than 7 days prior to event, but must pay a \$10 administration fee to do so. Any team traveling without the proper approval and forms is subject to a fine up to \$500 and potential censure, including a one (1) year suspension from participation in SRI sanctioned events.

Permission to travel is Granted: _____ Denied: _____ Fee Paid: _____

Signature: _____ Date: _____

Title: _____