

*This form must be* ***sent by the National Federation*** *to the* ***FIVB*** *(**worldtour@fivb.**com) and the* ***organizers*** *of the event concerned any time during the season but not later than 3 days before the event in which a coach would like to enter. This form will not be accepted if not typewritten (capital letters accepted).*

**THE NATIONAL FEDERATION OF: ..........................................................………………………………………………… IS REQUESTING AN ACCREDITATION FOR A COACH ACCOMPANYING A TEAM IN THE FOLLOWING EVENT.**

*It is agreed that the coach, that has reviewed and will oblige the* ***FIVB Coach`s Code of Conduct (***[***LINK HERE***](http://www.fivb.org/EN/BeachVolleyball/Forms/Athletes/2019/FIVB-DEV-2018-Coaches%20Code%20of%20Conduct.pdf)***) as well as completed the FIVB Prevention of Manipulation course*** [***(LINK HERE)***](https://www.fivb.com/development/manipulationcourse)*, can receive accreditation for the requested event and also receive exclusively the benefits enlisted in the Handbook.*

*The coach will be held accountable for his actions during the event and neither the FIVB nor the Organizers will be accountable for providing more than requirements pre-stablished.*

**2019/2020 COACHES ACCREDITATION**

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| **CATEGORY (indicate Star Category) :** |  |  |
| TITLE OF THE EVENT: ..................................................................................City: ..................................................................................Country: .................................................................................. Dates: .................................................................................. |

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| NF AUTHORISED SIGNATURE  | SEAL OF THE NF  | PLACE AND DATE |
| ........................................................ |    | .......................................................... |

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| COACHE’S NAME AND ATHLETES NAME TYPEWRITTEN (OR CAPITAL LETTER)  |
| Coach: Mr. / Mrs. / Ms. ----------------------------------------------------------Nationality: ---------------------------------------------Player 1: ---------------------------------------------------------------- FIVB Number-------------------- Player 2: ---------------------------------------------------------------- FIVB Number--------------------  |
| With my below signature, as a coach, I acknowledge that only qualified coaches with the necessary skills and expertise should receive a coaching accreditation and I hereby declare that I meet such standards. Any actions I take once accredited reflect upon all the FIVB, the FIVB World Tour coaches, my National Federation and my team in which I represent.Coaches signature:…………………………………………………… Place and date:…………………………………….. |