

**From -21 days to -1 minute before the start
 of the Preliminary Inquiry of QT (for GS and Open)***

BVB/03



**From -28 days to -1 minute before the start of the Preliminary Inquiry of
 MD (for Senior and Age Group WCHs)*

2014 WITHDRAWAL REQUESTS

CATEGORY	MEN	WOMEN
FIVB BVB World Tour Grand Slam	<input type="checkbox"/> Shanghai, CHN <input type="checkbox"/> Moscow, RUS <input type="checkbox"/> Berlin, GER <input type="checkbox"/> Stavanger, NOR	<input type="checkbox"/> Gtaad, SUI <input type="checkbox"/> The Hague, NED <input type="checkbox"/> Long Beach, USA <input type="checkbox"/> Klagenfurt, AUT <input type="checkbox"/> Stare Jablonki, POL <input type="checkbox"/> _____ Other Grand Slam
FIVB BVB World Tour Grand Slam Final	<input type="checkbox"/> FIVB Beach Volleyball World Tour Grand Slam Final (TBC)	
FIVB BVB World Tour Open	<input type="checkbox"/> Fuzhou, CHN <input type="checkbox"/> Puerto Vallarta, MEX <input type="checkbox"/> Prague, CZE <input type="checkbox"/> Anapa, RUS	<input type="checkbox"/> Xiamen, CHN <input type="checkbox"/> Phuket, THA <input type="checkbox"/> Parana, ARG <input type="checkbox"/> Doha, QAT <input type="checkbox"/> Chennai, IND <input type="checkbox"/> La Reunion, FRA <input type="checkbox"/> Durban, RSA
FIVB BVB Age Group World Championships	<input type="checkbox"/> U23 in Myslowice, POL <input type="checkbox"/> U19 in Porto, POR	<input type="checkbox"/> U17 in Bahia de B., MEX <input type="checkbox"/> U21 in Larnaka, CYP

WITHDRAWAL OF A TEAM

THE NATIONAL FEDERATION OF.....
 REQUESTS THE WITHDRAWAL FOR THE FOLLOWING TEAM IN THE AFOREMENTIONED EVENT:

TEAM	SHIRT #	LAST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	FIRST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	NICKNAME <i>(IF ANY)</i>	FIVB ID#
1.	#1				
	#2				

WITHDRAWAL OF AN ATHLETE

THE NATIONAL FEDERATION OF.....
 REQUESTS THE WITHDRAWAL FOR THE FOLLOWING TEAM IN THE AFOREMENTIONED EVENT:

LAST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	FIRST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	NICKNAME <i>(IF ANY)</i>	FIVB ID#

THE REQUEST FOR REPLACEMENT IS AS FOLLOWS:

LAST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	FIRST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	NICKNAME <i>(IF ANY)</i>	FIVB ID#

THE NEW TEAM COMPOSITION REQUEST IS AS FOLLOWS:

TEAM	SHIRT #	LAST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	FIRST NAME <i>TYPEWRITTEN (OR CAPITAL LETTER)</i>	NICKNAME <i>(IF ANY)</i>	FIVB ID#
1.	#1				
	#2				

For the details of the regulations concerning withdrawals, please refer to the Chapter 9 of the 2014 Handbook.

MEDICAL CERTIFICATE (or herein attached)

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NAME/SIGNATURE OR STAMP OF THE MEDICAL DOCTOR DATE AND PLACE

REASON OF FORCE MAJEURE

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Note:

In case of a dispute, a proof (i.e. positive fax report) must be provided to the FIVB in order to clearly confirm that the withdrawal of the team concerned from a 2014 FIVB Beach Volleyball event (BVB/03) including the appropriate Medical Certificate or the reason of "force majeure" have been duly sent in time to the FIVB. Any statement sent via e-mail will not have any validity.

NF AUTHORISED SIGNATURE	SEAL OF THE NF	PLACE AND DATE
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