



NEOASA  
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## SENIOR INTERSTATE TRAVEL REQUEST FORM

(Must be completed and approved at least one week prior to tournament.)



United States  
 Amateur Soccer Association, Inc.  
*A Division of the United States Soccer Federation*

The \_\_\_\_\_, an affiliated member  
 of the Oklahoma Soccer Association, requests permission to play in the  
 \_\_\_\_\_ Tournament, a sanctioned tournament  
 of the \_\_\_\_\_ State Association.

(Attach copy of current League Roster and proof of registration of any guest players.)

Tournament Name: \_\_\_\_\_

Tournament Director: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Dates: \_\_\_\_\_

Team Manager/Coach: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ Work: \_\_\_\_\_

\_\_\_\_\_  
 Signature of Team Manager/Coach

\_\_\_\_\_  
 Date

State Association: \_\_\_\_\_ Date Approved: \_\_\_\_\_

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Title