

BV-03**CEV BEACH VOLLEYBALL
WITHDRAWAL OF A TEAM**

The National Federation of _____ hereby withdraws
the following team or replaces the following athlete from the following event:

Category of the competition:	European Championships	Men
	Continental Cup	
	U18/20/22 European Championships	Women
Country of the competition:		
Venue & Date of the competition:		

A. WITHDRAWAL of a team:

Shirt #	FIVB #	Last name	First name
1			
2			

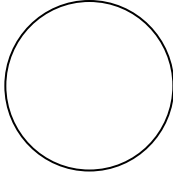
B. WITHDRAWAL & REPLACEMENT of a single athlete:

Last name	First name	is replaced by	Last name	First name

to form the new team of:

Shirt #	FIVB #	Last name	First name
1			
2			

Medical Certificate/Declaration of good faith: attached NOT attached

_____ Name of the President and/or Secretary General (printed)	 Seal of the National Federation
_____ Signature of the President and/or Secretary General	
_____ Date and Venue	

This form must be sent to beach@cev.eu duly completed.

Withdrawals and replacements of teams/athletes are subject to the CEV Regulatory Framework. Restrictions, Sanctions and Fines may apply for late or incomplete withdrawals or replacements.