

BEACH VOLLEY

INDICAZIONI PER L'ISCRIZIONE AI TORNEI INTERNAZIONALI FIVB



Questo documento è dedicato al seguente Torneo:

- VOLLEYBALL WORLD BEACH PRO TOUR (ELITE16, CHALLENGE, FUTURES)

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Requisiti

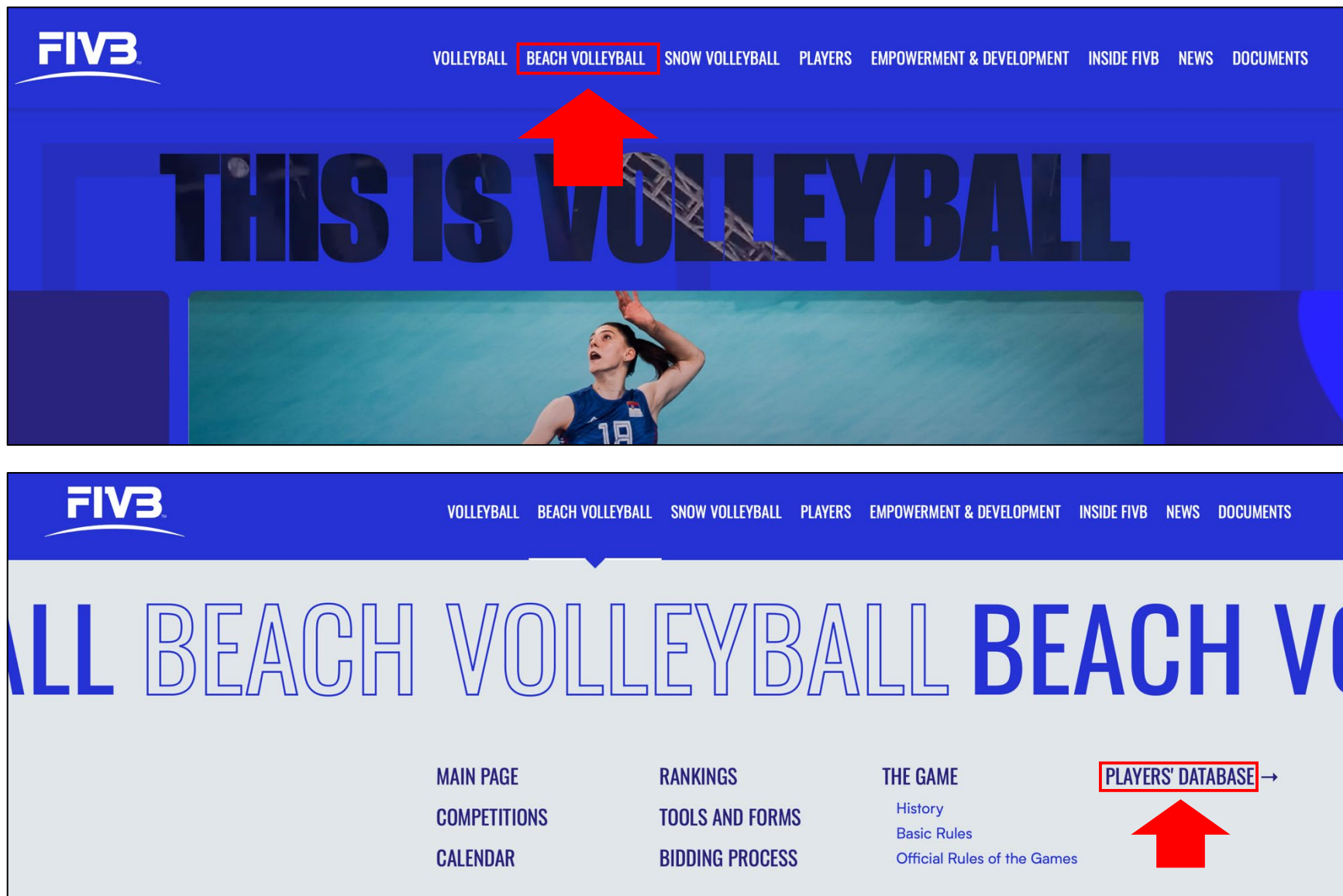


| | Requisiti | Validità |
|---|--|--|
| • | Regolarmente tesserato alla FIPAV | Dal 1° luglio al 30 giugno |
| • | Possesso del Certificato Medico per l'attività agonistica in corso di validità | |
| • | Possesso dell'ID FIVB | Non c'è la scadenza |
| • | Player Participation Agreement | Fino al 31 dicembre di ogni anno |
| • | Annual Health Certificate (BVB/10) | Fino al 31 dicembre di ogni anno |
| • | FIVB Anti-Doping – We play it Clean! | Fino al 31 dicembre dell'anno olimpico |
| • | FIVB Prevention of Competition Manipulation | Fino al 31 dicembre dell'anno olimpico |

ID FIVB



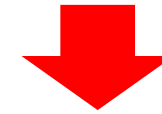
È possibile controllare il proprio ID FIVB tramite il sito della [FIVB](https://www.fivb.com)



FILTER BY...

Inserire il proprio nome e cognome

VOLLEYBALL **BEACH VOLLEYBALL** SNOW VOLLEYBALL






| | | | | | | | | | |
|----------------|---|-------------|---|--------|---|-------------|---|-------|---|
| CONFEDERATIONS | ▼ | FEDERATIONS | ▼ | GENDER | ▼ | SEARCH NAME | 🔍 | RESET | ↺ |
|----------------|---|-------------|---|--------|---|-------------|---|-------|---|


| | | | | | | | | | |
|----------------|---|-------------|---|--------|---|------------|---|-------|---|
| CONFEDERATIONS | ▼ | FEDERATIONS | ▼ | GENDER | ▼ | ██████████ | 🔍 | RESET | ↺ |
|----------------|---|-------------|---|--------|---|------------|---|-------|---|

| COUNTRY | TEAM | LAST NAME | FIRST NAME | GENDER | AGE | |
|---|------|------------|------------|------------|-----|--------|
|  ITA | | ██████████ | ██████████ | ██████████ | ██ | More + |








ITA





PERSONAL

Birth Date: 

Birth Place: 

Height: 

Weight: 

Fivb ID: 9


Nationality: Italy

CAREER

Position: Unknown

Qualora non lo si avesse, è possibile chiederlo al settore Beach Volley della FIPAV l'ID FIVB tramite il relativo modulo ([BVF-06](#)) scaricabile dal sito federale

 : Campi obbligatori






BVF-06 Modulo di richiesta ID FIVB/Account FIVB
-Atleta-

Il modulo è modificabile
Si chiede di modificare direttamente il PDF

| | | |
|------------------------|------------------|------------------|
| Nome | Cognome | Codice Fiscale |
| Indirizzo mail | Genere | Cittadinanza |
| Data di nascita / / | Luogo di nascita | Stato di nascita |
| Residente a () in Via | | CAP |

Questo modulo deve essere compilato ed inviato insieme a **una copia fronte retro del documento di identità valido (preferibilmente il passaporto)** al settore Beach Volley all'indirizzo di posta elettronica teams.beachvolley@federvolley.it

FEDERAZIONE ITALIANA PALLAVOLO
 Via Vitorchiano, 81/87
00189 – Roma
 +39 06.3334.9480/9542/
9482
 www.federvolley.it
beachvolley@federvolley.it - teams.beachvolley@federvolley.it

Player Participation Agreement



È possibile scaricare il documento dal sito della [FIVB](https://www.fivb.com)

The screenshot shows the FIVB website's navigation menu and a section titled "ATHLETES, COACHES AND PHYSIOTHERAPISTS FORMS".

Navigation Menu:

- VOLLEYBALL
- BEACH VOLLEYBALL
- SNOW VOLLEYBALL
- PLAYERS
- EMPOWERMENT & DEVELOPMENT
- INSIDE FIVB
- NEWS
- DOCUMENTS

Main Content Area:

- MAIN PAGE
- COMPETITIONS
- CALENDAR
- RANKINGS
- TOOLS AND FORMS** (highlighted with a red box and a red arrow pointing to it)
- BIDDING PROCESS
- THE GAME
 - History
 - Basic Rules
 - Official Rules of the Games
- PLAYERS' DATABASE →

ATHLETES, COACHES AND PHYSIOTHERAPISTS FORMS

- FIVB Coach's Code of Conduct (In force since: December 3, 2018)
- Team Delegation Member's Accreditations (In force since: January 10, 2022)
- International Player's Participation Agreement (In force since: February 1, 2023)
- BVB/31b — Delegation's Travel Schedule (In force since: February 1, 2023)
- BVB/31 — Athletes' Travel Schedule (In force since: February 1, 2023)
- BVB/O4 — Change of Player Request (In force since: January 15, 2022)
- BVB/O3 — Withdrawal Request (In force since: January 14, 2023)
- BVB/O2 — Wild Card Request (In force since: January 15, 2022)
- 2024 Beach Volleyball Player Participation Agreement** (In force since: January 15, 2024) (highlighted with a red box and a red arrow pointing to it)



FIVB BEACH VOLLEYBALL EVENTS 2024

Participation Agreement

FIVB – VW – Beach Volleyball Players

FÉDÉRATION INTERNATIONALE DE VOLLEYBALL

Château Les Tourelles, Edouard-Sandoz 2-4, 1006 Lausanne Switzerland

Tel: +41 (21) 345 3535 Fax: +41 (21) 345 3548

Last updated: 15 Jan 2024

This Agreement (hereinafter the "AGREEMENT") is entered into on
1 January 2024 (hereinafter the "Effective Date") between

FÉDÉRATION INTERNATIONALE DE VOLLEYBALL

Chemin Edouard Sandoz 2-4,
1006 Lausanne, Switzerland
represented by its President, Dr. Ary S. Graça F"
(hereinafter "FIVB")

and

VW VOLLEYBALL WORLD S.A.

Chemin Edouard Sandoz 2-4,
1006 Lausanne, Switzerland
represented by its Chair, L. Fernando Lima, and its CEO, Finn Taylor
(hereinafter "VW")

and

PLAYER'S NAME

FIVB ID:

(hereinafter "PLAYER 1")

(All of the above parties referred to together as the "PARTIES")

The PLAYER individually states and agrees to the following:

The PLAYER joins the FIVB's aim to develop Beach Volleyball as a major world media and entertainment sport through world class planning and organisation of competitions, marketing and promotional activities in the respect of the FIVB Constitution, Disciplinary Regulations, Medical and Anti-Doping Regulations, other FIVB Regulations and decisions, the FIVB Beach Volleyball Sports Regulations, the FIVB Beach Volleyball Sport Operational Manual, the Rules of the Game and any contractual commitments made by the FIVB and/or VW with organisers and informed to the PLAYER in advance (in their version in force at the time of signing of this AGREEMENT, hereinafter jointly referred to as the "FIVB REGULATORY FRAMEWORK"). In case of discrepancy between this AGREEMENT and the FIVB REGULATORY FRAMEWORK, the FIVB REGULATORY FRAMEWORK shall prevail.

The PLAYER understands that the right to play in «FIVB EVENTS» [which include and are individually referred to as FIVB EVENT: Volleyball World Beach Pro Tour, including Finals, FIVB Beach Volleyball World Championships, FIVB Beach Volleyball Underage World Championships (U-19, U-21), Olympic Qualification Competitions and Continental Cup] – even if such events are renamed or reformed in any way – as well as any other international events recognised by the FIVB (i.e. World, Official and Recognized competitions defined in the FIVB Beach Volleyball Sports Regulations) or to be sanctioned or created in the future by the FIVB and/or VW is to be seen as a cooperation for the enhancement of Beach Volleyball, and acknowledges that he/she has read and commits to comply with the FIVB REGULATORY FRAMEWORK, particularly but not limited to those governing his/her participation at FIVB EVENTS as provided herein.

10. ENTIRE AGREEMENT, SEVERABILITY

- 10.1. Should any provision of this AGREEMENT be found to be invalid or unenforceable, such invalidity or unenforceability shall not affect the validity or operation of any other provision. In such case, the invalid or unenforceable provision shall be replaced with a valid and enforceable provision which most closely approximates the intent and economic effect of the invalid or unenforceable provision.
- 10.2. This AGREEMENT constitutes the entire agreement between the PARTIES in relation to its subject matter, superseding and extinguishing any prior agreements, arrangements, undertakings of any nature, between the PARTIES, whether oral or written, in relation to this subject matter. Any amendments to this AGREEMENT, including this Clause 10.2, must be in writing.
- 10.3. This AGREEMENT shall be binding upon signature on the PARTIES. Digital signature of this AGREEMENT in any form shall create a legally binding obligation on the party executing such signature with the same force and effect as if the signature were an original.
- 10.4. Neither party shall assign any right or obligation hereunder in whole or in part, without the prior written consent of the other party, except that the FIVB may freely assign its rights to VW.

The PLAYER signs this AGREEMENT individually and for the entire TERM, regardless if he/she plays together with the other PLAYER or not, and declares to have read, understood and hereby decided to sign this AGREEMENT ratifying all the terms of its content.

Place, Date

FIVB

FIVB

Place, Date

VW

VW

Place, Date

Player

 : Campi obbligatori

This Agreement (hereinafter the "AGREEMENT") is entered into on
1 January 2024 (hereinafter the "Effective Date") between

FÉDÉRATION INTERNATIONALE DE VOLLEYBALL
Chemin Edouard Sandoz 2-4,
1006 Lausanne, Switzerland
represented by its President, Dr. Ary S. Graça F*
(hereinafter "FIVB")

and

VW VOLLEYBALL WORLD S.A.
Chemin Edouard Sandoz 2-4,
1006 Lausanne, Switzerland
represented by its Chair, L. Fernando Lima, and its CEO, Finn Taylor
(hereinafter "VW")

and

PLAYER'S NAME Nome Cognome
FIVB ID: 123456 (6 numeri)
(hereinafter "PLAYER 1")

(All of the above parties referred to together as the "PARTIES")

The PLAYER individually states and agrees to the following:

The PLAYER joins the FIVB's aim to develop Beach Volleyball as a major world media and entertainment sport through world class planning and organisation of competitions, marketing and promotional activities in the respect of the FIVB Constitution, Disciplinary Regulations, Medical and Anti-Doping Regulations, other FIVB Regulations and decisions, the FIVB Beach Volleyball Sports Regulations, the FIVB Beach Volleyball Sport Operational Manual, the Rules of the Game and any contractual commitments made by the FIVB and/or VW with organisers and informed to the PLAYER in advance (in their version in force at the time of signing of this AGREEMENT, hereinafter jointly referred to as the "FIVB REGULATORY FRAMEWORK"). In case of discrepancy between this AGREEMENT and the FIVB REGULATORY FRAMEWORK, the FIVB REGULATORY FRAMEWORK shall prevail.

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2

10. ENTIRE AGREEMENT, SEVERABILITY

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The PLAYER signs this AGREEMENT individually and for the entire TERM, regardless if he/she plays together with the other PLAYER or not, and declares to have read, understood and hereby decided to sign this AGREEMENT ratifying all the terms of its content.

Luogo, Data della firma

Place, Date

Firma dell'atleta

Player

FIVB

FIVB

Place, Date

VW

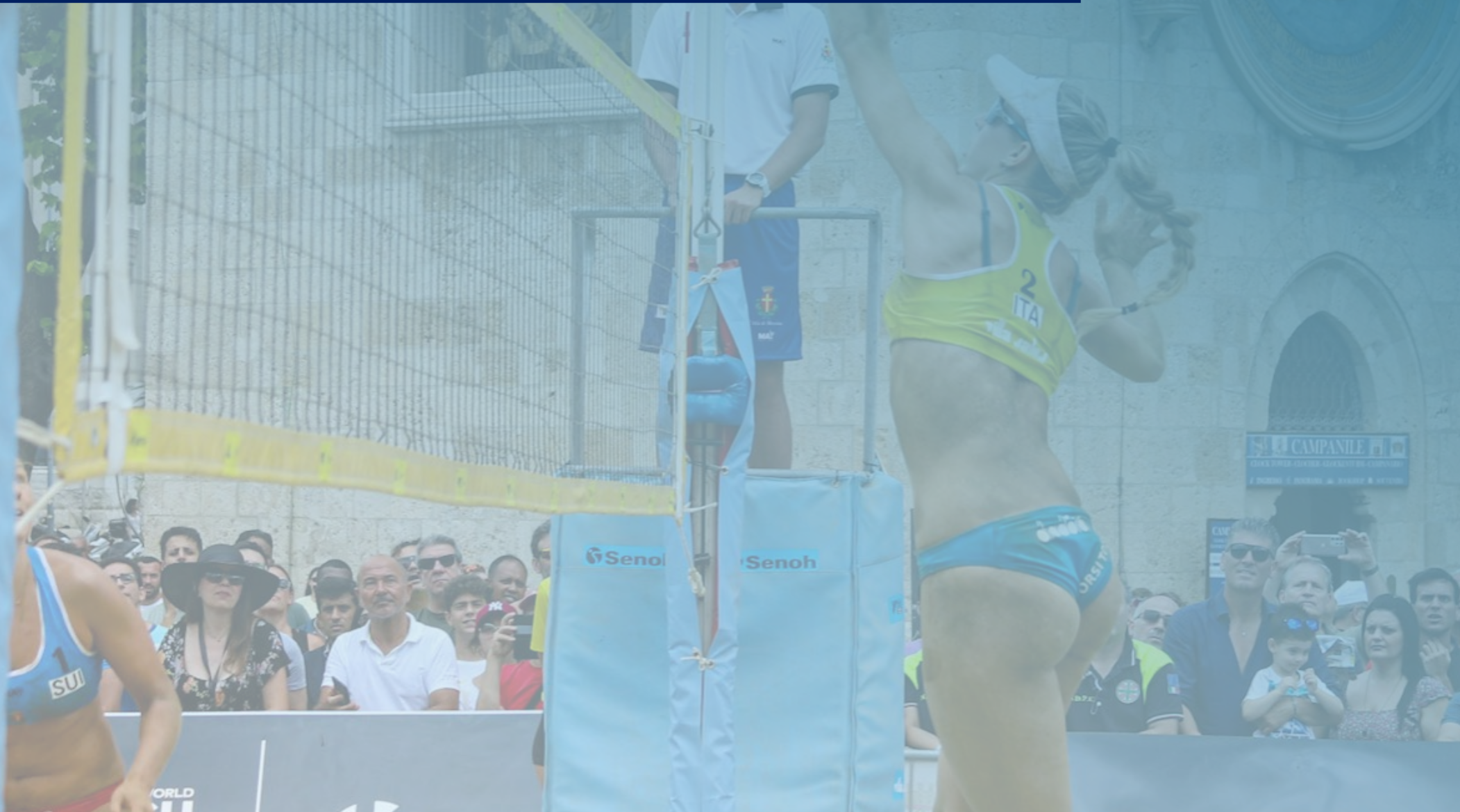
VW

10

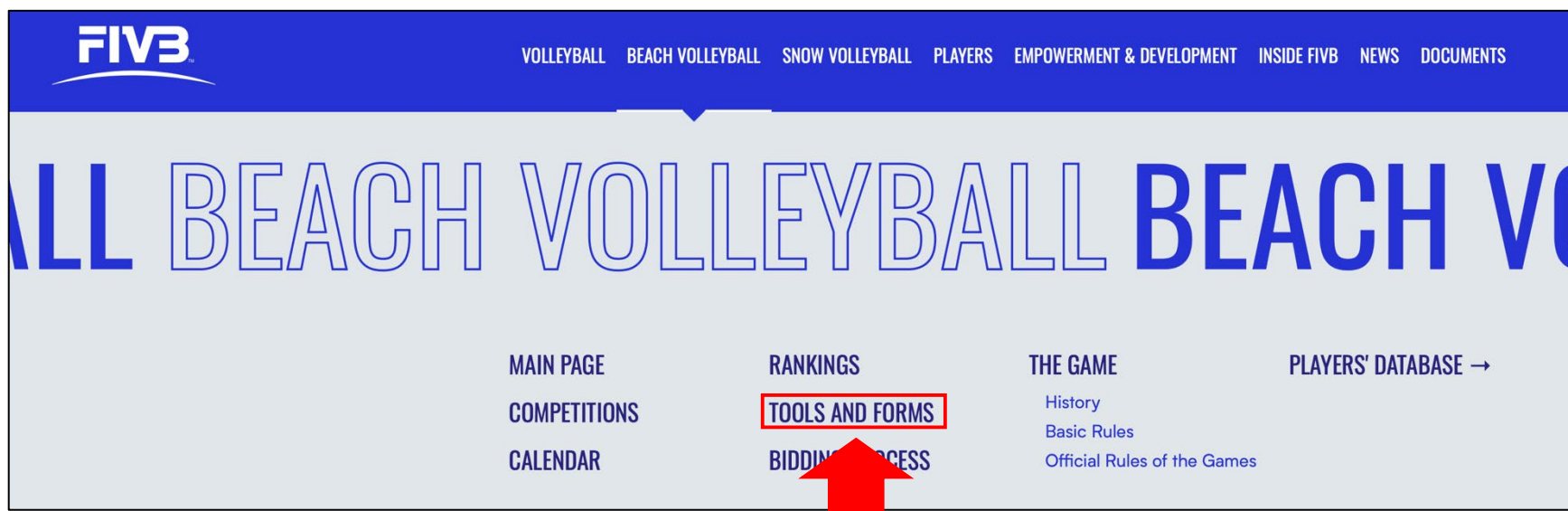
Si prega di inviare il documento intero (dalla prima all'ultima pagina)

Verranno accettati soltanto i documenti in formato PDF correttamente compilati

Annual Health Certificate (BVB/10)



È possibile scaricare il documento dal sito della [FIVB](#)



- 30 DAYS

BVB/10



ANNUAL HEALTH CERTIFICATE

This BVB/10 form shall be governed by and construed in accordance with Swiss law, without regard to its conflicts of law provisions.

THE PLAYER YOU ARE EXAMINING WILL PLAY UNDER DEMANDING AND STRESSFUL CONDITIONS INCLUDING ALL KIND OF WEATHER CONDITIONS LIKE HEAT, COLD, HIGH HUMIDITY, EXPOSURE TO INTENSE SUNLIGHT, HIGH ALTITUDE AND HIGH PHYSICAL EXERTIONS WHICH CAN LAST UP TO 3 HOURS.

| | |
|--------------------|--------------|
| PLAYER LAST NAME : | FIRST NAME : |
| BIRTH DATE : | COUNTRY : |

HEREWITH I CONFIRM THAT, TO THE BEST OF MY KNOWLEDGE AND AFTER PROFESSIONAL MEDICAL EXAMINATION OF THE PLAYER HEREIN MENTIONED, HE/SHE IS IN GOOD HEALTH, ABLE TO TRAVEL BY ANY MEANS OF TRANSPORTATION AND PLAY IN VOLLEYBALL COMPETITIONS.

AS A PARTICIPANT IN A FIVB OR EUROPEAN VOLLEYBALL CONFEDERATION (CEV) EVENT, HEREBY ACKNOWLEDGE AND AGREE AS FOLLOWS:

1. I have reviewed and understood the FIVB Medical & Anti-Doping Regulations.
2. I consent and agree to comply with and be bound by all of the provisions of the FIVB Anti-Doping Rules, including but not limited to, all amendments to the Anti-Doping Rules and all International Standards incorporated in the Anti-Doping Rules.
I consent and agree to the creation of my profile in the WADA Doping Control Clearing House (ADAMS), as requested under the WADA Code to which the FIVB, as an International Federation, is a signatory, and/or any other authorized National Anti-Doping Organizations (NADOs) similar system under the FIVB's agreement for the sharing of information, and to the entry on my doping controls, Whereabouts and Therapeutic Use Exemptions related data in this system. I acknowledge that I will have access and will be able to revise all personal information that I have provided through ADAMS.
3. The Athlete and the FIVB agree that any dispute, controversy or claim arising out of or in connection with a decision made pursuant to the FIVB Medical and Anti-Doping Regulations, which cannot be settled amicably and which remains unsettled once the legal remedies established by the FIVB Medical and Anti-Doping Regulations and FIVB Disciplinary Regulations have been exhausted, shall be submitted exclusively to the Court of Arbitration for Sport (CAS) for final and binding arbitration in accordance with the Code of Sports-related Arbitration in force at the time a notice for arbitration is submitted, which shall be conducted in English with its seat in Lausanne, Switzerland.
4. I consent that certain personal information, such as my name and date of birth, may be disclosed to the public for a period of time in a final decision issued by the FIVB Disciplinary Panel in accordance with the FIVB's public disclosure requirements as a signatory of the World Anti-Doping Code.
5. I have read and understood the "FIVB Athlete's information on the processing of personal information under the WADA Code and the FIVB Medical and Anti-Doping Regulations", available under [FIVB Data ProtectionAthletes personal informationclean version \(5\).pdf](#) and the general FIVB Data Protection Information available under [Privacy Policy | volleyballworld.com](#).
6. I have read and understood this Acknowledgement and Agreement.

| | |
|-----------------------|--|
| PLAYER SIGNATURE | DOCTOR NAME |
| SIGNATURE: | LAST NAME : FIRST NAME : SIGNATURE : |
| MEDICAL EXAMINATION : | PLACE D M Y |

FIVB Official form BVB/10-2022



: Campi obbligatori

| - 30 DAYS | | BVB/10 | |
|---|---------------------------|---|-----------|
| ANNUAL HEALTH CERTIFICATE | | | |
| <p>This BVB/10 form shall be governed by and construed in accordance with Swiss law, without regard to its conflicts of law provisions.</p> <p>THE PLAYER YOU ARE EXAMINING WILL PLAY UNDER DEMANDING AND STRESSFUL CONDITIONS INCLUDING ALL KIND OF WEATHER CONDITIONS LIKE HEAT, COLD, HIGH HUMIDITY, EXPOSURE TO INTENSE SUNLIGHT, HIGH ALTITUDE AND HIGH PHYSICAL EXERTIONS WHICH CAN LAST UP TO 3 HOURS.</p> | | | |
| PLAYER LAST NAME : | FIRST NAME : | | |
| Cognome | Nome | | |
| BIRTH DATE : | COUNTRY : | | |
| Data di nascita | Italy | | |
| <p>HEREWITH I CONFIRM THAT, TO THE BEST OF MY KNOWLEDGE AND AFTER PROFESSIONAL MEDICAL EXAMINATION OF THE PLAYER HEREIN MENTIONED, HE/SHE IS IN GOOD HEALTH, ABLE TO TRAVEL BY ANY MEANS OF TRANSPORTATION AND PLAY IN VOLLEYBALL COMPETITIONS.</p> <p>AS A PARTICIPANT IN A FIVB OR EUROPEAN VOLLEYBALL CONFEDERATION (CEV) EVENT, HEREBY ACKNOWLEDGE AND AGREE AS FOLLOWS:</p> <ol style="list-style-type: none"> 1. I have reviewed and understood the FIVB Medical & Anti-Doping Regulations. 2. I consent and agree to comply with and be bound by all of the provisions of the FIVB Anti-Doping Rules, including but not limited to, all amendments to the Anti-Doping Rules and all International Standards incorporated in the Anti-Doping Rules. I consent and agree to the creation of my profile in the WADA Doping Control Clearing House (ADAMS), as requested under the WADA Code to which the FIVB, as an International Federation, is a signatory, and/or any other authorized National Anti-Doping Organizations (NADOs) similar system under the FIVB's agreement for the sharing of information, and to the entry on my doping controls, Whereabouts and Therapeutic Use Exemptions related data in this system. I acknowledge that I will have access and will be able to revise all personal information that I have provided through ADAMS. 3. The Athlete and the FIVB agree that any dispute, controversy or claim arising out of or in connection with a decision made pursuant to the FIVB Medical and Anti-Doping Regulations, which cannot be settled amicably and which remains unsettled once the legal remedies established by the FIVB Medical and Anti-Doping Regulations and FIVB Disciplinary Regulations have been exhausted, shall be submitted exclusively to the Court of Arbitration for Sport (CAS) for final and binding arbitration in accordance with the Code of Sports-related Arbitration in force at the time a notice for arbitration is submitted, which shall be conducted in English with its seat in Lausanne, Switzerland. 4. I consent that certain personal information, such as my name and date of birth, may be disclosed to the public for a period of time in a final decision issued by the FIVB Disciplinary Panel in accordance with the FIVB's public disclosure requirements as a signatory of the World Anti-Doping Code. 5. I have read and understood the "FIVB Athlete's information on the processing of personal information under the WADA Code and the FIVB Medical and Anti-Doping Regulations", available under FIVB Data ProtectionAthletes personal informationclean version (5).pdf and the general FIVB Data Protection information available under Privacy Policy Volleyballworld.com. 6. I have read and understood this Acknowledgement and Agreement. | | | |
| PLAYER SIGNATURE | | DOCTOR NAME | |
| SIGNATURE: <div style="text-align: center; color: red;">Firma dell'atleta</div> | | LAST NAME : Cognome del medico FIRST NAME : Nome del medico SIGNATURE : Firma del medico | |
| MEDICAL EXAMINATION : | PLACE | D | M |
| | Luogo della visita medica | Data | Mese Anno |
| <small>(Data della firma) FIVB Official form BVB/10-2022</small> | | | |

Verranno accettati soltanto i documenti in formato PDF correttamente compilati

FIVB Anti-Doping We play it Clean!



Chi non ha le credenziali di accesso può chiedere al Settore Beach tramite il relativo [modulo](#) scaricabile dal sito federale

Link: [FIVB Anti-Doping – We play it Clean!](#)

FIVB
FÉDÉRATION INTERNATIONALE
DE VOLLEYBALL

Log into the platform

VIS username (email address if you don't...)

Password

Log in

[Forgot your password?](#)

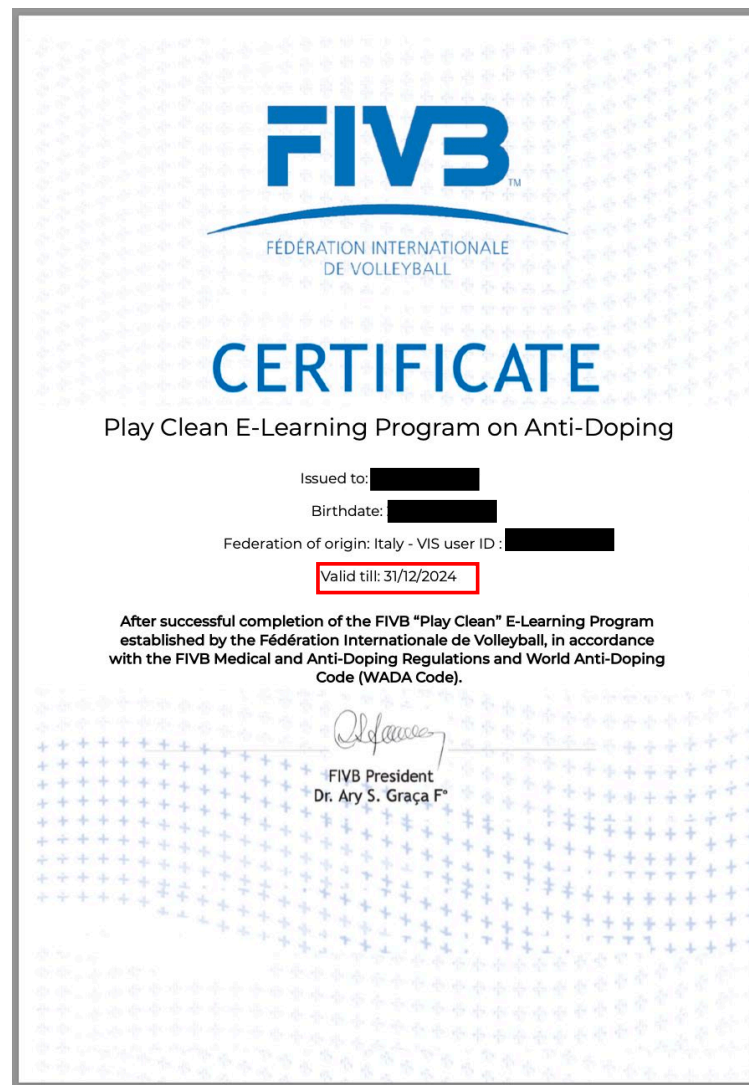
[Forgot your VIS password?](#)

[Cookie preferences](#)

Welcome to FIVB E-Learning Platform

Cookies and Privacy Policy
Hi, this website uses essential cookies to ensure its proper operation and tracking cookies to understand how you interact with it. The latter will be set only after consent. [Let me choose](#)

Accept all Settings



Al termine del corso sarà rilasciato un certificato che dovrà essere inviato insieme a [BVF-01A](#) (Modulo di iscrizione)


Questo certificato sarà valido fino alla fine dell'anno dei Giochi Olimpici


Es. Parigi 2024 (il certificato è valido fino al 31 dicembre 2024)




FIVB Prevention of Competition Manipulation



Link: [FIVB Prevention of Competition Manipulation](#)

**PREVENTION OF COMPETITION
MANIPULATION**

**ONLINE COURSES AND TECHNICAL MATERIAL**

**FIVB E-LEARNING
PLATFORM**


Chi non ha le credenziali di accesso può chiedere al Settore Beach tramite il relativo [modulo](#) scaricabile dal sito federale

FIVB
FÉDÉRATION INTERNATIONALE
DE VOLLEYBALL

🌐

Log into the platform

VIS username (email address if you don't...)

Password

Log in

[Forgot your password?](#)

[Forgot your VIS password?](#)

[Cookie preferences](#)

Welcome to FIVB E-Learning Platform

Cookies and Privacy Policy
Hi, this website uses essential cookies to ensure its proper operation and tracking cookies to understand how you interact with it. The latter will be set only after consent. [Let me choose](#)

Accept all **Settings**



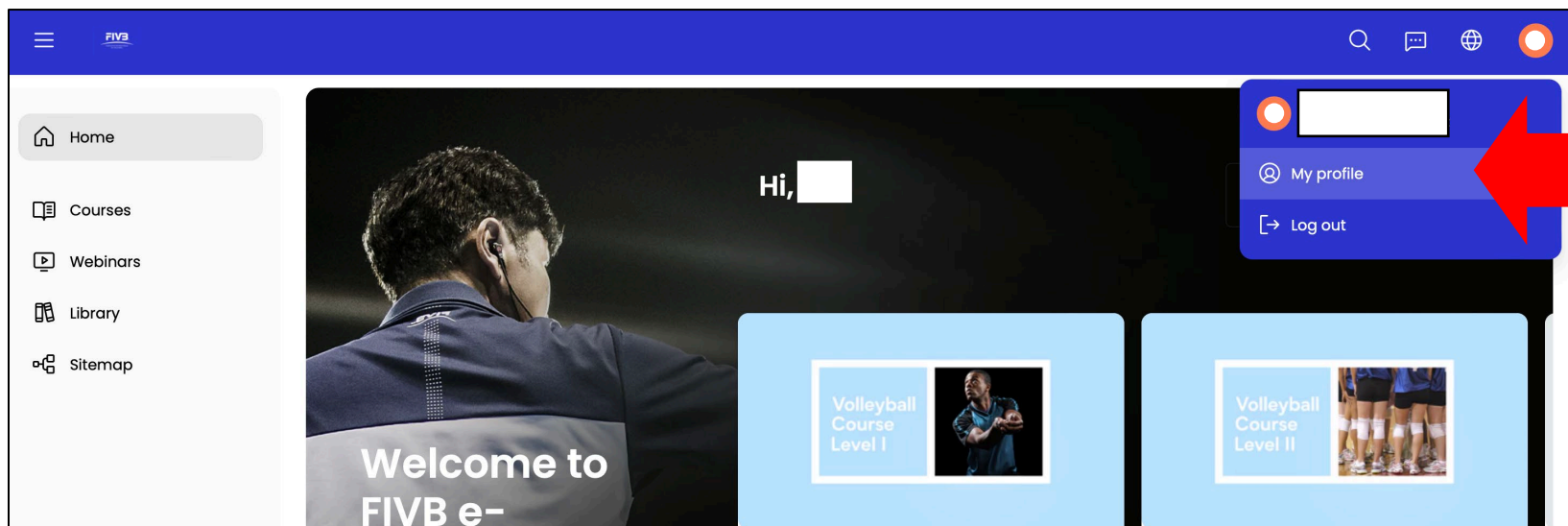
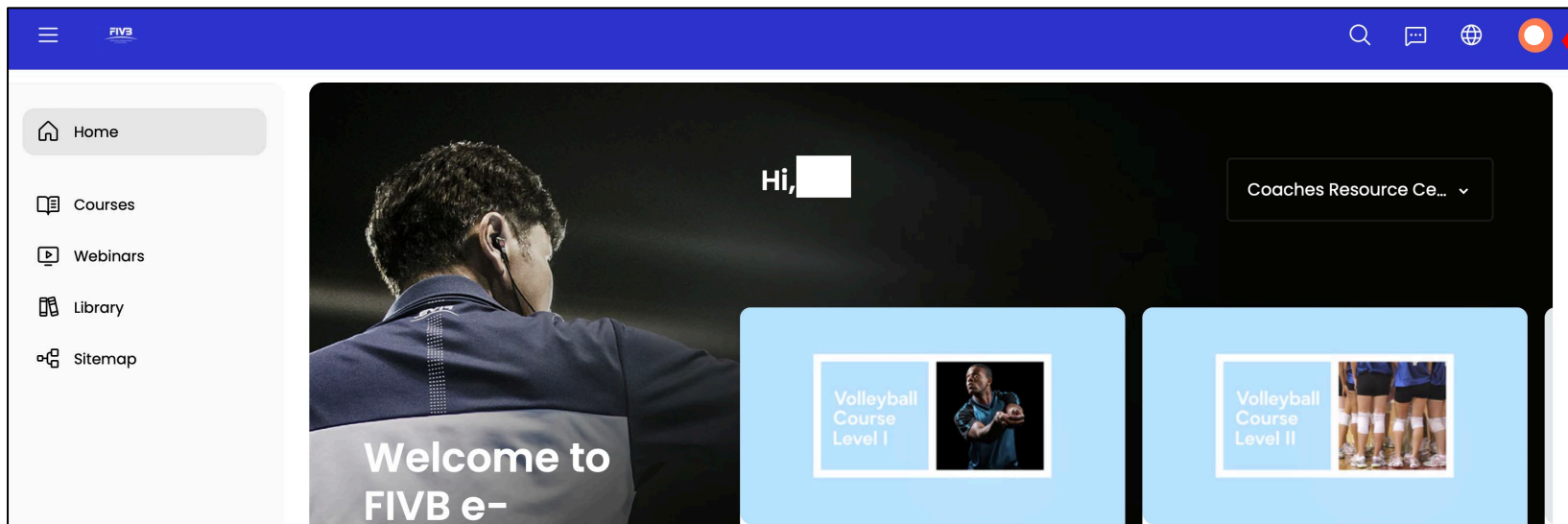
Al termine del corso sarà rilasciato un certificato che dovrà essere inviato insieme a [BVF-01A](#) (Modulo di iscrizione)

Questo certificato sarà valido fino alla fine dell'anno dei Giochi Olimpici

Es. Parigi 2024 (il certificato è valido fino al 31 dicembre 2024)

Modalità di download del certificato





S

Home

Courses

Webinars

Library

Sitemap

Legal center

[Contact us](#) [Cookie preferences](#)

Country
Italy

VIS User Id
[REDACTED]

VIS User TypeNo
[REDACTED]

Certificates

| | | | |
|---|--|---|--|
| Class Prevention of Competition Manipulation Course | | Module Competition Manipulation | |
| Class Play Clean | | | |

Moduli




Moduli (dal PC)

I documenti possono essere visionati sul [sito federale](#)

Media

News Comunicati Stampa Newsletter Fotogallery Cartelle Stampa Podcast




BEACH VOLLEY
SCOPRI DI PIÙ

PALLAVOLO
SCOPRI DI PIÙ


SITTING VOLLEY
SCOPRI DI PIÙ

SNOW VOLLEY
SCOPRI DI PIÙ




Prosegue a Pavia il lavoro delle campionesse d'Europa

Lun, 03/04/2024 - 14:48
Prosegue la preparazione della nazionale femminile




Oltre la rete, oltre il muro: concluso a Cracovia il Torneo della Memoria

Lun, 03/04/2024 - 12:57




Campionato Italiano per Società 2023/24: i vincitori della diciottesima giornata

Lun, 03/04/2024 - 11:55




Campionati Europei Under 20: quarto e quinto posto per le nazionali azzurre

Lun, 03/04/2024 - 11:30



Dalla collaborazione tra FIPAV, Lega



EVENTI ▾
CLASSIFICHE ▾
ATLETI ▾
ALBO D'ORO ▾
NOTIZIE
DOCUMENTI ▾
LOGIN

DOCUMENTI ATTIVITÀ NAZIONALI
DOCUMENTI ATTIVITÀ INTERNAZIONALI

CAMPIONATO ITALIANO A

IL CALENDARIO

14 - 16 giugno | Caorle (VE) 
28 - 30 giugno | Catania 
5 - 7 luglio | Giugliano (NA) 
12 - 14 luglio | Montesilvano (PE) Coppa Italia 
10 - 21 luglio | Biadene (TO) 

| Documenti | | |
|--|----------------|---------|
| FIVB Regolamento Beach Volleyball 2021-2024 (Inglese) | 07 Maggio 2024 | Scarica |
| FIVB Regolamento Beach Volleyball 2021-2024 (Italiano) | 07 Maggio 2024 | Scarica |
| FIVB SPORT OPERATIONS MANUAL Beach Volleyball | 07 Maggio 2024 | Scarica |
| CEV Beach Volleyball Competitions Regulations | 07 Maggio 2024 | Scarica |
| Guida Pratica Beach Volley 2023-2024 aggiornata il 1° aprile 2024 | 07 Maggio 2024 | Scarica |
| Modulistica | | |
| BVF-01A Modulo di iscrizione -Tornei Internazionali FIVB- | 23 Aprile 2024 | Scarica |
| BVF-01B Modulo di iscrizione -Tornei Internazionali CEV- | 06 Maggio 2024 | Scarica |
| BVF-06 Modulo di richiesta ID FIVB/Account FIVB -Atleta- | 06 Maggio 2024 | Scarica |
| BVF-07 Modulo di richiesta ID FIVB/Account FIVB -Personale medico- | 06 Maggio 2024 | Scarica |
| BVF-08 Modulo di richiesta Accredito Officials | 06 Maggio 2024 | Scarica |

Moduli (dal Cellulare)



Iscrizione



Non sarà accettata la richiesta dell'iscrizione dopo la chiusura accettazione domande

Si chiede di inviare a teams.beachvolley@federvolley.it i seguenti documenti **in un'unica mail**:

1. BVF-01A (Modulo di iscrizione)
2. Player Participation Agreement
3. Annual Health Certificate (BVB/10)
4. Certificato di fine corso FIVB Anti-Doping – We play it Clean!
5. Certificato di fine corso FIVB Prevention of Competition Manipulation

☐ : Campi obbligatori

Si prega di leggere attentamente le indicazioni riportate nel modulo

Link: [BVF-01A](#)

BVF-01A Modulo di iscrizione
-Tornei Internazionali FIVB-

Il modulo è modificabile
Si chiede di modificare direttamente il PDF

| N. | Nome | Cognome | Matricola FIPAV | FIVB ID | Indirizzo mail |
|----|------|---------|-----------------|---------|----------------|
| 1 | | | | | |
| 2 | | | | | |

Genere ☐ Maschile ☐ Femminile

| N. | Nome | Categoria | Città | Paese | Data iniziale |
|-----|----------------|-----------|-------------|--------|---------------|
| Es. | Beach Pro Tour | Futures | Battipaglia | Italia | 22/06/2024 |
| 1 | | | | | / / |
| 2 | | | | | / / |
| 3 | | | | | / / |
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| 11 | | | | | / / |
| 12 | | | | | / / |
| 13 | | | | | / / |
| 14 | | | | | / / |
| 15 | | | | | / / |

Questo modulo deve essere compilato ed inviato insieme ai seguenti documenti:

- [2024 Beach Volleyball Player Participation Agreement](#) (uno ad atleta)
- [BVB/10 Annual Health Certificate](#) (uno ad atleta con la firma di un medico, non necessariamente da un medico sportivo)
- Certificato di fine corso [FIVB Anti-Doping We play it Clean!](#) (uno ad atleta)
- Certificato di fine corso [FIVB Prevention of Competition Manipulation](#) (uno ad atleta)

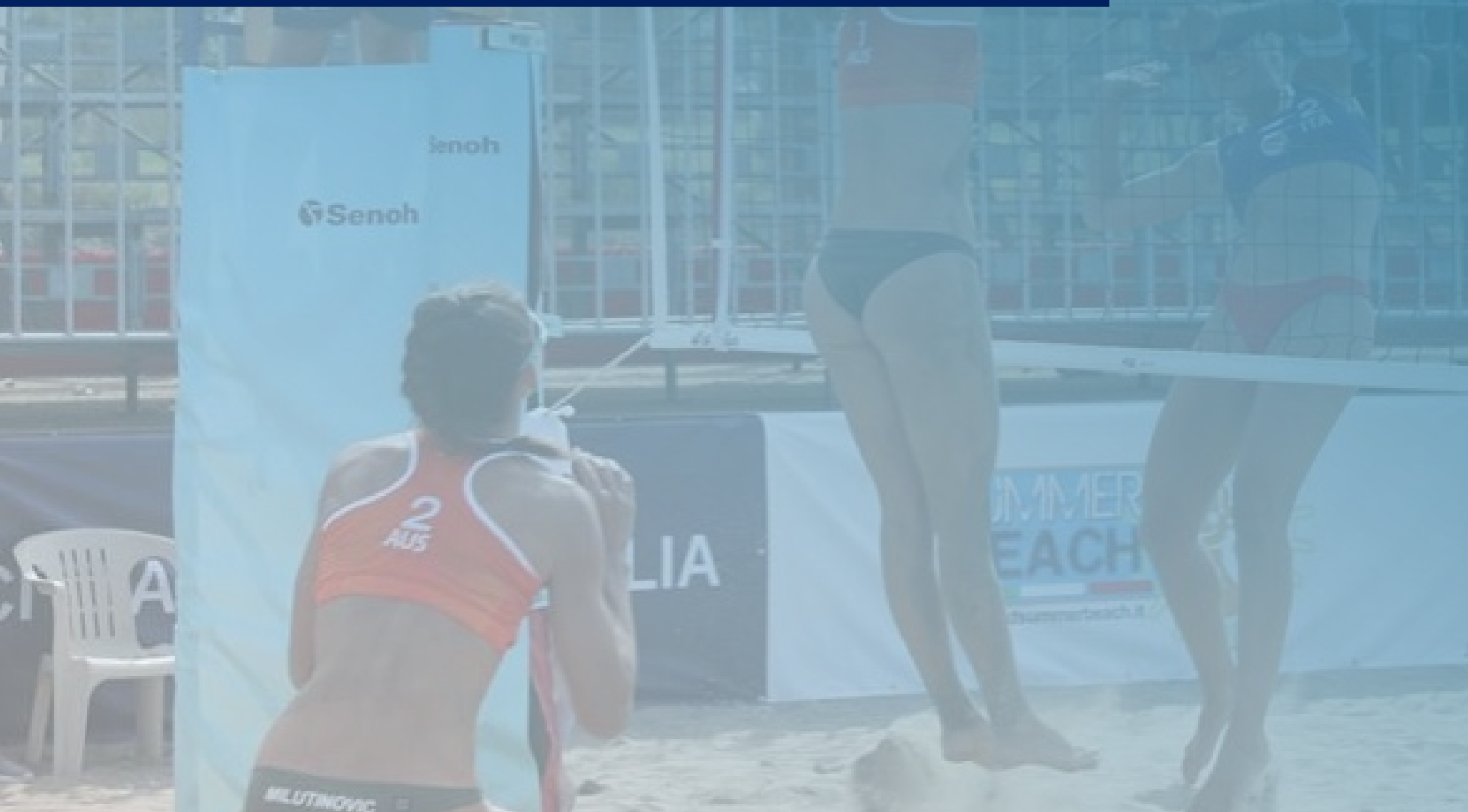
al settore Beach Volley all'indirizzo di posta elettronica teams.beachvolley@federvolley.it entro **10 giorni** prima della chiusura dell'iscrizione del primo torneo della stagione.

Tutti i documenti sono accettati solo ed esclusivamente in formato PDF

FEDERAZIONE ITALIANA PALLAVOLO
Via Visorchianno, 81/87 00189 - Roma +39 06.3334.9480/9542/9482 www.federvolley.it
beachvolley@federvolley.it - teams.beachvolley@federvolley.it

BVF-01A (Modulo di iscrizione)

Tempistiche



- 45

- Chiusura Accettazione Domande

- 35

- Chiusura dell'iscrizione FIVB

- 28

- Confirmed Entry List

- 1

- Preliminary Inquiry

Cancellazione



Questo modulo (BVB/03) deve essere compilato in inglese ed inviato insieme ai [documenti necessari](#) al settore Beach Volley all'indirizzo di posta elettronica teams.beachvolley@federvolley.it

☐ : Campi obbligatori

☐ : Campi riservati alla FIPAV

Link: [BVB/03 - Withdrawal Request](#)

Verranno accettati soltanto i documenti in formato Word correttamente compilati

Fédération Internationale de Volleyball,
Château Les Tournelles,
Avenue Edouard Sandoz 2-4
1006 Lausanne, Switzerland
e-mail: beachvolleyball@fivb.com

FIVB

TEAM WITHDRAWAL REQUEST FORM **BVB/03**

This form must be completed by the National Federation of the team concerned and sent to the FIVB Beach Volleyball Department from the date when the Confirmed Entry List is published until 1 minute before start of the Preliminary Inquiry of Qualification or Main Draw Tournament.

| | | |
|--|-------------------------------------|---------------------------------------|
| GENDER | MEN <input type="checkbox"/> | WOMEN <input type="checkbox"/> |
| TOURNAMENT CATEGORY/ TOURNAMENT TITLE | | |
| HOST CITY/COUNTRY | | |

- For the **Futures category events organised in Europe**, this form must be addressed to CEV at beach@cev.eu within the set timeframe and with a copy to beachvolleyball@fivb.com.
- For the **Futures category events organised in other confederations territory**, this form must be sent to the FIVB Beach Volleyball Department at beachvolleyball@fivb.com.

The National Federation of.

Requests a withdrawal of the following team registered for the above event:

| | | | |
|--|--|---|--|
| MAIN DRAW TOURNAMENT <input type="checkbox"/> | QUALIFICATION TOURNAMENT <input type="checkbox"/> | RESERVE <input type="checkbox"/> | |
| TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
| | | | |


Medical Certificate together with stamp and signature of doctor (or herein attached)

.....

Reasons of force majeure

.....

Important note: all necessary documents must be provided as per the Sport Regulations.

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

Updated January 2023

Fédération Internationale de Volleyball,
Château Les Tourelles,
Avenue Edouard Sandoz 2-4
1006 Lausanne, Switzerland
e-mail: beachvolleyball@fivb.com



TEAM WITHDRAWAL REQUEST FORM

BVB/03

This form must be completed by the National Federation of the team concerned and sent to the FIVB Beach Volleyball Department from the date when the Confirmed Entry List is published until 1 minute before start of the Preliminary Inquiry of Qualification or Main Draw Tournament.

| | |
|--|--|
| GENDER | MEN <input checked="" type="checkbox"/> WOMEN <input type="checkbox"/> |
| TOURNAMENT CATEGORY/ TOURNAMENT TITLE | 2024 VOLLEYBALL WORLD BEACH PRO TOUR Futures |
| HOST CITY/COUNTRY | Battipaglia - Italy |

- For the Futures category events organised in Europe, this form must be addressed to CEV at beach@cev.eu within the set timeframe and with a copy to beachvolleyball@fivb.com.
- For the Futures category events organised in other confederations territory, this form must be sent to the FIVB Beach Volleyball Department at beachvolleyball@fivb.com.

The National Federation of Italy

Requests a withdrawal of the following team registered for the above event:

| | | | |
|---|--|---|--|
| MAIN DRAW TOURNAMENT <input type="checkbox"/> | QUALIFICATION TOURNAMENT <input checked="" type="checkbox"/> | RESERVE <input type="checkbox"/> | |
| TEAM NAME | FIVB ID# | LAST NAME <small>TYPEWRITTEN (OR CAPITAL LETTER)</small> | FIRST NAME <small>TYPEWRITTEN (OR CAPITAL LETTER)</small> |
| Cognome 1/ | 123456 | Cognome | Nome |
| Cognome 2 | 123457 | Cognome | Nome |

Medical Certificate together with stamp and signature of doctor (or herein attached)

.....

.....

Reasons of force majeure

.....

.....

Important note: all necessary documents must be provided as per the Sport Regulations.

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

Cambio coppia



Questo modulo (BVB/04) deve essere compilato in inglese ed inviato insieme ai [documenti necessari](#) al settore Beach Volley all'indirizzo di posta elettronica teams.beachvolley@federvolley.it

 : Campi obbligatori

 : Campi riservati alla FIPAV

Link: [BVB/04 - Change of Player Request](#)



Verranno accettati soltanto i documenti in formato Word correttamente compilati

Fédération Internationale de Volleyball,
Château Les Tourelles,
Avenue Edouard Sandoz 2-4
1006 Lausanne, Switzerland
e-mail: beachvolleyball@fivb.com

FIVB

CHANGE OF PLAYER REQUEST FORM BVB/04

This form must be completed by the National Federation of the team concerned and sent to the FIVB Beach Volleyball Department from the date when the Confirmed Entry List is published until 1 minute before start of the Preliminary Inquiry of Qualification or Main Draw Tournament.

| | | |
|--|---|---|
| GENDER | MEN  | WOMEN  |
| TOURNAMENT CATEGORY/ TOURNAMENT TITLE | | |
| HOST CITY/COUNTRY | | |

- For the Futures category events organised in Europe, this form must be addressed to CEV at beach@cev.eu within the set timeframe and with a copy to beachvolleyball@fivb.com.
- For the Futures category events organised in other confederations territory, this form must be sent to the FIVB Beach Volleyball Department at beachvolleyball@fivb.com.

The National Federation of:

Requests a replacement of a player in the following team registered for the above event:
Withdrawal of an athlete

| SHIRT # | TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
|---------|-----------|----------|--|---|
| | | | | |

The request for replacement is as follows

| SHIRT # | TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
|---------|-----------|----------|--|---|
| | | | | |

The new team composition is as follows

| TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
|-----------|----------|--|---|
| | | | |


Medical Certificate together with stamp and signature of doctor (or herein attached)

.....

Reasons of force majeure

.....

Important note: all necessary documents must be provided as per the Sport Regulations.

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

Updated January 2022

Fédération Internationale de Volleyball,
Château Les Tourelles,
Avenue Edouard Sandoz 2-4
1006 Lausanne, Switzerland
e-mail: beachvolleyball@fivb.com



CHANGE OF PLAYER REQUEST FORM

BVB/04

This form must be completed by the National Federation of the team concerned and sent to the FIVB Beach Volleyball Department from the date when the Confirmed Entry List is published until 1 minute before start of the Preliminary Inquiry of Qualification or Main Draw Tournament.

| | |
|--|--|
| GENDER | MEN <input checked="" type="checkbox"/> WOMEN <input type="checkbox"/> |
| TOURNAMENT CATEGORY/ TOURNAMENT TITLE | 2024 VOLLEYBALL WORLD BEACH PRO TOUR Futures |
| HOST CITY/COUNTRY | Battipaglia - Italy |

- For the Futures category events organised in Europe, this form must be addressed to CEV at beach@cev.eu within the set timeframe and with a copy to beachvolleyball@fivb.com.
- For the Futures category events organised in other confederations territory, this form must be sent to the FIVB Beach Volleyball Department at beachvolleyball@fivb.com.

The National Federation of... Italy

Requests a replacement of a player in the following team registered for the above event:

Withdrawal of an athlete

| SHIRT # | TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
|---------|---------------------|----------|--|---|
| 1 | Cognome 1/Cognome 2 | 123456 | Cognome | Nome |

The request for replacement is as follows

| SHIRT # | TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
|---------|---------------------|----------|--|---|
| 1 | Cognome 1/Cognome 2 | 123457 | Cognome | Nome |


The new team composition is as follows

| TEAM NAME | FIVB ID# | LAST NAME TYPEWRITTEN (OR CAPITAL LETTER) | FIRST NAME TYPEWRITTEN (OR CAPITAL LETTER) |
|---------------------|----------|--|---|
| Cognome 1/Cognome 2 | 123457 | Cognome | Nome |
| | 123458 | Cognome | Nome |

Medical Certificate together with stamp and signature of doctor (or herein attached)

Reasons of force majeure

Important note: all necessary documents must be provided as per the Sport Regulations.

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

Updated January 2022

Multa



Beach Pro Tour Elite16

| Tempistiche | Multa | Documenti necessari |
|---|-------|--|
| Prima dell'uscita del Confirmed Entry List | No | Nessun documento |
| Dopo l'uscita del Confirmed Entry List e fino alle 16 del mercoledì di 3 settimane prima dell'inizio Torneo | No | <ul style="list-style-type: none"> • BVB/03-Withdrawal Request (Cancellazione) oppure BVB/04-Change of Player Request (Cambio coppia) • Certificato medico scritto in inglese |
| Dopo le 16 del mercoledì di 3 settimane prima dell'inizio Torneo fino alle 16 del venerdì di 1 settimana prima dell'inizio del Torneo | No | <ul style="list-style-type: none"> • BVB/03-Withdrawal Request (Cancellazione) oppure BVB/04-Change of Player Request (Cambio coppia) • Certificato medico scritto in inglese • Prova di acquisto biglietto viaggio |
| Dopo le 16 del venerdì di 1 settimana prima dell'inizio del Torneo fino all'inizio della Preliminary Inquiry | Sì* | <ul style="list-style-type: none"> • BVB/03-Withdrawal Request (Cancellazione) oppure BVB/04-Change of Player Request (Cambio coppia) |

Beach Pro Tour Challenge e Futures

| Tempistiche | Multa | Documenti necessari |
|---|-------|--|
| Prima dell'uscita del Confirmed Entry List | No | Nessun documento |
| Dopo l'uscita del Confirmed Entry List e fino alle 16 del martedì di 3 settimane prima dell'inizio Torneo | No | <ul style="list-style-type: none"> BVB/03-Withdrawal Request (Cancellazione) oppure BVB/04-Change of Player Request (Cambio coppia) Certificato medico scritto in inglese |
| Dopo le 16 del martedì di 3 settimane prima dell'inizio Torneo fino alle 16 del venerdì di 1 settimana prima dell'inizio del Torneo | No | <ul style="list-style-type: none"> BVB/03-Withdrawal Request (Cancellazione) oppure BVB/04-Change of Player Request (Cambio coppia) Certificato medico scritto in inglese Prova di acquisto biglietto viaggio |
| Dopo le 16 del venerdì di 1 settimana prima dell'inizio del Torneo fino all'inizio della Preliminary Inquiry | Sì* | <ul style="list-style-type: none"> BVB/03-Withdrawal Request (Cancellazione) oppure BVB/04-Change of Player Request (Cambio coppia) |

Il Certificato medico scritto in inglese e la prova di acquisto biglietto viaggio non sono richiesti alle squadre di riserva

* la multa sarà detratta automaticamente da eventuali premi future

| Torneo | Importo multa per atleta |
|---------------------|--------------------------|
| Elite16 Main draw | USD 1.500,00 |
| Elite16 Qualifica | USD 500,00 |
| Challenge Main draw | USD 700,00 |
| Challenge Qualifica | USD 250,00 |
| Futures Main Draw | USD 200,00 |
| Futures Qualifica | USD 100,00 |

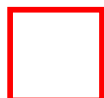
Nel caso del cambio coppia del Futures in Europa presentando **Certificato medico scritto in inglese e Prova di acquisto biglietto viaggio** non è prevista la multa

Wild Card



Questo modulo (BVB/02) deve essere compilato in inglese ed inviato entro 6 settimane prima dalla data di inizio del torneo al settore Beach Volley all'indirizzo

di posta elettronica teams.beachvolley@federvolley.it



: Campi obbligatori



: Campi riservati alla FIPAV

Link: [BVB/02 - Wild Card Request](#)

Verranno accettati soltanto i documenti in formato Word correttamente compilati

Fédération Internationale de Volleyball,
Château Les Tourelles,
Avenue Edouard Sandoz 2-4
1006 Lausanne, Switzerland
e-mail: beachvolleyball@fivb.com

FIVB

WILD CARD REQUEST FORM **BVB/02**

This form must be completed by the National Federation of the team concerned and sent to the FIVB Beach Volleyball Department **no later than 5 weeks** before the start of the event. The Wild Card request will be considered as valid only if all necessary information indicated here-below are provided correctly.

| | | |
|--|-------------------------------------|---------------------------------------|
| GENDER | MEN <input type="checkbox"/> | WOMEN <input type="checkbox"/> |
| TOURNAMENT CATEGORY/ TOURNAMENT TITLE | | |
| HOST CITY/COUNTRY | | |


- For the **Futures category events organised in Europe**, this form must be addressed to CEV at beach@cev.eu within the set timeframe and with a copy to beachvolleyball@fivb.com
- For the Futures category events organised in other confederations territory, this form must be sent to the FIVB Beach Volleyball Department at beachvolleyball@fivb.com

The National Federation of

Requests a Wild Card for the following team(s) in the above Event:

| MAIN DRAW TOURNAMENT <input type="checkbox"/> | | QUALIFICATION TOURNAMENT <input type="checkbox"/> | |
|---|----------|--|---|
| TEAM NAME | FIVB ID# | LAST NAME <small>TYPEDWRITTEN (OR CAPITAL LETTER)</small> | FIRST NAME <small>TYPEDWRITTEN (OR CAPITAL LETTER)</small> |
| | | | |
| | | | |
| | | | |

Reasons:

| | | |
|--|--|---|
| NF AUTHORISED SIGNATURE <input type="text"/> | SEAL OF THE NF  | PLACE AND DATE <input type="text"/> |
|--|--|---|

Updated January 2022

Fédération Internationale de Volleyball,
Château Les Tourelles,
Avenue Edouard Sandoz 2-4
1006 Lausanne, Switzerland
e-mail: beachvolleyball@fivb.com



WILD CARD REQUEST FORM

BVB/02

This form must be completed by the National Federation of the team concerned and sent to the FIVB Beach Volleyball Department **no later than 5 weeks** before the start of the event. The Wild Card request will be considered as valid only if all necessary information indicated here-below are provided correctly.

| | |
|--|--|
| GENDER | MEN <input checked="" type="checkbox"/> WOMEN <input type="checkbox"/> |
| TOURNAMENT CATEGORY/ TOURNAMENT TITLE | 2024 VOLLEYBALL WORLD BEACH PRO TOUR Futures |
| HOST CITY/COUNTRY | Battipaglia - Italy |


- For the Futures category events organised in Europe, this form must be addressed to CEV at beach@cev.eu within the set timeframe and with a copy to beachvolleyball@fivb.com
- For the Futures category events organised in other confederations territory, this form must be sent to the FIVB Beach Volleyball Department at beachvolleyball@fivb.com

The National Federation of Italy

Requests a Wild Card for the following team(s) in the above Event:

| | | | |
|--|---|---|--|
| MAIN DRAW TOURNAMENT <input checked="" type="checkbox"/> | QUALIFICATION TOURNAMENT <input type="checkbox"/> | | |
| TEAM NAME | FIVB ID# | LAST NAME <small>TYPEWRITTEN (OR CAPITAL LETTER)</small> | FIRST NAME <small>TYPEWRITTEN (OR CAPITAL LETTER)</small> |
| Cognome 1/Cognome 2 | 123456 | Cognome | Nome |
| | 123457 | Cognome | Nome |
| | | | |
| | | | |

Reasons:
In inglese

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

Contatti





<https://beachvolley.federvolley.it>



teams.beachvolley@federvolley.it



+39 06.3334.9480/9482



FEDERAZIONE ITALIANA
PALLAVOLO
