



0-7

PRELIMINARY INQUIRY
Inspeccion Preliminar

TEAM: CITY: DATE: TIME:
 Equipo: Ciudad: Fecha: Hora:

1.CHECKING OF TEAM OFFICIALS / Control de Oficiales del Equipo

HOTEL:

| | FAMILY NAME, FIRST NAME Nombres y Apellidos | NATIONALITY Nacionalidad | ROOM Habitacion | BENCH Banca |
|---|--|-----------------------------|----------------------|----------------------|
| TEAM MANAGER Delegado del Equipo | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| HEAD COACH Entrenador | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 1st. ASSISTANT COACH 1er. Asistente Entrenador | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| MEDICAL DOCTOR/ Medico | <input type="text"/> | ID# <input type="text"/> | <input type="text"/> | <input type="text"/> |
| PHYSIOTHERAPIST/ Fisioterapeuta | <input type="text"/> | ID# <input type="text"/> | <input type="text"/> | <input type="text"/> |
| TRAINER/ Entrenador Fisico | <input type="text"/> | ID# <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ACCRED.JOURNALIST/ STATISTICIAN | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| SUPPORT STAFF | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| SUPPORT STAFF | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| CAPTAIN Capitan | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

2.CHECKING OF O-2bis DATA AND PASSPORTS / Control Formulario 0-2bis, y pasaportes

| | OK | NO | | OK | NO | | OK | NO | |
|--|-----------------------|-----------------------|---------------------------------------|-----------------------|-----------------------|--|---|-----------------------|-----------------------|
| 1 NAMES Nombres | <input type="radio"/> | <input type="radio"/> | 4 HEIGHTS Estaturas | <input type="radio"/> | <input type="radio"/> | 7 CLUBS OF ORIGIN Club de Origen | <input type="radio"/> | <input type="radio"/> | |
| 2 DATES OF BIRTH Fechas de Nacimiento | <input type="radio"/> | <input type="radio"/> | 5 WEIGHTS Pesos | <input type="radio"/> | <input type="radio"/> | 8 HIGHEST REACH : SPIKE Alcance Maximo de Ataque | <input type="radio"/> | <input type="radio"/> | |
| 3 NATIONALITIES Nacionalidades | <input type="radio"/> | <input type="radio"/> | 6 JERSEY NUMBERS Numeros Camisetas | <input type="radio"/> | <input type="radio"/> | 9 HIGHEST REACH : BLOCK 2 HANDS Alcance Maximo de Bloqueo | <input type="radio"/> | <input type="radio"/> | |
| REMARKS / Comentarios | <input type="text"/> | | | | | | 10 DOCTOR FIVB ACCREDITED Doctor Acreditado FIVB | <input type="radio"/> | <input type="radio"/> |

3.TEAM UNIFORMS / Uniformes del Equipo

OK NO

| | | | |
|---|-----------------------------|-----------------------|-----------------------|
| COLORS /3 SETS Colores / 3 Juegos | NUMBER/Numero: | <input type="radio"/> | <input type="radio"/> |
| | CONTRAST / Contraste | <input type="radio"/> | <input type="radio"/> |
| SHIRTS / Camiseta | PLACE / Lugar | <input type="radio"/> | <input type="radio"/> |
| N° | SIZE - Talla: | <input type="radio"/> | <input type="radio"/> |
| | CONTRAST / Contraste | <input type="radio"/> | <input type="radio"/> |
| SHORT / Pantalon Corto | PLACE / Lugar | <input type="radio"/> | <input type="radio"/> |
| N° | SIZE - Talla: | <input type="radio"/> | <input type="radio"/> |
| | CONTRAST / Contraste | <input type="radio"/> | <input type="radio"/> |
| PLAYERS NAMES Nombre de Jugadores | PLACE / Lugar | <input type="radio"/> | <input type="radio"/> |
| | SIZE - Talla: | <input type="radio"/> | <input type="radio"/> |
| | CONTRAST / Contraste | <input type="radio"/> | <input type="radio"/> |
| MANUFACTURER Fabricante | | <input type="radio"/> | <input type="radio"/> |
| PUBLICITY Publicidad | | <input type="radio"/> | <input type="radio"/> |

4.MEDICAL ITEMS / Documentos Medicos

OK NO

| | | |
|--|-----------------------|-----------------------|
| 1 HEALTH CERTIFICATE (M-3) Certificado de Salud | <input type="radio"/> | <input type="radio"/> |
| 2 PLAYERS AND OFFICIALS AGREEMENT (L-1) Acuerdo de Jugadores y Oficiales (L-1) | <input type="radio"/> | <input type="radio"/> |
| 3 MEDICAL CERTIFICATE Certificado Medico | <input type="radio"/> | <input type="radio"/> |
| 4 THERAPEUTIC USE EXEMPTION (M-8) Exención de uso Terapéutico (M-8) | <input type="radio"/> | <input type="radio"/> |
| 5 NORCECA Anti-Doping Players ID (L2) | <input type="radio"/> | <input type="radio"/> |
| 6 FIVB Play Clean Player Certificate (L3) | <input type="radio"/> | <input type="radio"/> |
| 7 FIVB Course on Prevention of Competition Manipulation Certificate (L4) | <input type="radio"/> | <input type="radio"/> |
| 8 PCR (COVID-19 test) | <input type="radio"/> | <input type="radio"/> |
| 5 TRAVEL ARRANGEMENTS / Itinerario de Viaje | <input type="radio"/> | <input type="radio"/> |
| 1 DEPARTURE AFTER ELIMINATION ARRANGED Itinerario de Salida después de eliminación | <input type="radio"/> | <input type="radio"/> |
| 2 SEGURO DE EQUIPO (TEAM INSURANCE) | <input type="radio"/> | <input type="radio"/> |

REMARKS /
Comentarios:

6. INSTRUCTIONS, INFO AND DOCUMENTS HANDED OVER BY THE O.C./ Instrucciones, Informaciones y Documentos entregados por C. O.

| | OK | NO | | OK | NO |
|--|-----------------------|-----------------------|--|-----------------------|-----------------------|
| 1 REGISTRATION FEE Cuota de Inscripción | <input type="radio"/> | <input type="radio"/> | 9 PHOTOCOPIES OF PLAYERS PASSPORT Fotocopias Pasaportes de los Jugadores | <input type="radio"/> | <input type="radio"/> |
| 2 ANTI-DOPING FEE Cuota de Antidopaje | <input type="radio"/> | <input type="radio"/> | 10 ADDITIONAL TEAM STAFF PAYMENT Pago Personal Adicional del Equipo | <input type="radio"/> | <input type="radio"/> |
| 3 50% REFEREE PER DIEM PAYMENT 50 % Pago Per Diem del Arbitro | <input type="radio"/> | <input type="radio"/> | 11 EVENT HANDBOOK Manual del Evento | <input type="radio"/> | <input type="radio"/> |
| 4 GENERAL TECHNICAL MEETING Reunion Tecnica General | <input type="radio"/> | <input type="radio"/> | 12 COMPETITION REGULATIONS Regulaciones de Competencia | <input type="radio"/> | <input type="radio"/> |
| 5 OPENING CEREMONY Ceremonia de Apertura | <input type="radio"/> | <input type="radio"/> | 13 TRAINING SCHEDULE Calendario de Entrenamiento | <input type="radio"/> | <input type="radio"/> |
| 6 TRANSPORTATION Transportacion | <input type="radio"/> | <input type="radio"/> | 14 COMPETITION FORMAT / MATCH SCHEDULE Formato de competencia y Calendario | <input type="radio"/> | <input type="radio"/> |
| 7 MEALS Alimentacion | <input type="radio"/> | <input type="radio"/> | 15 ACCREDITATION CARDS Acreditaciones | <input type="radio"/> | <input type="radio"/> |
| 8 NATIONAL ANTHEM & FLAG Himno Nacional y Bandera | <input type="radio"/> | <input type="radio"/> | 16 AUTHORIZATION FOR TEAM VIDEO CAMERA Autorizacion para Camara de Video del Equipo | <input type="radio"/> | <input type="radio"/> |

REMARKS / Comentarios:

7. VOLLEYBALL EQUIPMENT PROVIDED / Utileria de Voleibol Suministrada

| | OK | NO | | OK | NO |
|--|-----------------------|-----------------------|-------------------|-----------------------|-----------------------|
| 1 BALLS FOR TRAINING Balones de Entrenamiento | <input type="radio"/> | <input type="radio"/> | 3 OTHERS Otros | <input type="radio"/> | <input type="radio"/> |
| 2 TOWELS Toallas | <input type="radio"/> | <input type="radio"/> | | | |

REMARKS / Comentarios:

8. AUTHORIZED SIGNATURES / Firmas Autorizadas :**DELEGATION / Delegacion**TEAM MANAGER
Delegado del Equipo

NAME / Nombre

SIGNATURE / FIRMA

HEAD COACH
Entrenador

NAME / Nombre

SIGNATURE / FIRMA

CONTROL COMMITTEE / Comité de ControlCC. PRESIDENT
Presidente CC

NAME / Nombre

SIGNATURE / FIRMA

COMPETITION DIRECTOR
Director de Competencias

NAME / Nombre

SIGNATURE / FIRMA

ORGANIZING COMMITTEE / Comité Organizador

NAME / Nombre

SIGNATURE / FIRMA