



Sponsored by AYSO Area 11Q, Orange County, California

## Area 11Q Orange County Spring Classic Team Application Form



### Application Instructions

Applications are now being accepted for entrance into the Area 11Q Orange County Spring Classic.

The deadline to enter the tournament is Monday May 1st, **2010**. Applications accepted by that date will be given priority for acceptance into the tournament; all others will be accepted based on any available openings.

Applications will be accepted on a first-come basis, based on a completed application. To be considered complete, your application must include all of the following:

1. Team Application Form, signed by the Head Coach and the Regional Commissioner.
2. Team Roster Form signed by your Regional Commissioner.

**Roster Notes:**

- Alternatively, an eAYSO Roster form will be accepted, however it must include the names of the Head Coach and Assistant Coach and be signed by your Regional Commissioner.
- Roster changes will be allowed up until Team Check-in; after that, no roster changes. All roster changes must be approved by your Regional Commissioner.
- Rosters must be comprised solely of players who were registered to play in the just concluded AYSO primary season program.
- Up to 3 guest players may be added to your roster from a neighboring AYSO region. In this case, the guest player's Regional Commissioner must sign the roster.
- Player roster limits are as follows:

U-19	18 players max	11-v-11 play
U-16	18 players max	11-v-11 play
U-14	15 players max	11-v-11 play
U-12	12 players max	9-v-9 play
U-10	10 players max	7-v-7 play

3. The completed Referee Form signed by your Regional Referee Administrator (if you're not planning to bring referees, just check the box on the Referee Form and return it without the RRA signature).
4. A single Regional check for the total amount of the Team Entry Fee and the Referee Commitment Fee.

Team fees are:	Age Division	Team Entry Fee	Referee Fee	Total Fee
	U-19	\$400	\$150	\$550
	U-16	\$400	\$150	\$550
	U-14	\$400	\$150	\$550
	U-12	\$400	\$150	\$550
	U-10	\$350	\$150	\$500

Send your completed Regional Check to:

Area 11-Q Orange County Spring Classic  
1875 Parkcrest Drive  
Costa Mesa, CA 92627

If accepted, it will be assumed that you intend for your team to play the entire tournament. There will be no rain out date. .

If your application is not accepted, you will be offered the opportunity to be placed on a waiting list, or if you prefer we will return your application to you.

Refund: if you withdraw your application 19 or more days from the start of the tournament, a full refund will be issued. If you withdraw after that time, we will only issue a refund if a replacement team can be found, less a \$50 administration fee.

All information about the tournament can be obtained by visiting our website at [www.ayso11q.org](http://www.ayso11q.org)

Please note that email and the internet will be the primary means of communication for this tournament.

We will be sending out information via email once your application is received. In the meantime, if you have any further questions, you may contact us as follows:

Brett Clement; 949-232-9280  
E-mail; [c0achbrett@yahoo.com](mailto:c0achbrett@yahoo.com)  
Web Site; [www.ayso11q.org](http://www.ayso11q.org)



# Area 11Q Orange County Spring Tournament Team Application Form



Application Date: \_\_\_\_\_

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Region #: \_\_\_\_\_ Region Name: \_\_\_\_\_

Team Name: \_\_\_\_\_

Age Division: (Please Circle)      U-10      U-12      U-14      U-16      U-19      Boys      Girls      Coed

### Contact Information

Coach Name: _____	Asst. Coach Name: _____
Email: _____	Email: _____
Mailing Address: _____	Mailing Address: _____
City/State/Zip: _____	City/State/Zip: _____
Evening Phone Number: _____	Evening Phone Number: _____
Emergency Phone Number: _____	Emergency Phone Number: _____
AYSO ID#: _____	AYSO ID# _____
Certification Level: _____	Certification Level: _____
Safe Haven Date: _____	Safe Haven Date: _____

### Team Rating Criteria:

- 1) We are an All Star/Select Team, the only one from our region. \_\_\_\_\_ Yes      \_\_\_\_\_ No
- 2) We are an All Star/Select Team, one of \_\_\_\_\_ teams in this age division from our region \_\_\_\_\_ Yes      \_\_\_\_\_ No
- 3) We are a Fall/Spring regular-season team. \_\_\_\_\_ Yes      \_\_\_\_\_ No
- 4) My team competitive rating between 1 (low) and 10 (high) is \_\_\_\_\_
- 5) The average age of our players as of January 1, 2010 is \_\_\_\_\_

### Team Head Coach Approval:

Yes, I have read the tournament rules and I promise to abide by them.

\_\_\_\_\_

Yes, I understand that this is a 2-day tournament and that the medal round games are on the second day. I hereby notify you that I will NOT be able to complete the tournament for the following reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Coach Signature

**Regional Commissioner Approval:** Yes, the above team has my permission to attend the Area Q Orange County Spring Classic. Please report any behavior problems to me immediately. I understand that players from outside my region (Guest Players) will need approval as well from the Guest Player regional commissioner. I hereby approve the addition of \_\_\_\_\_ Guest Players for this team.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature (in red or blue ink only, please)

Email: \_\_\_\_\_ Best Phone: \_\_\_\_\_

### The Referee Refund Check should be mailed to:

AYSO Region # \_\_\_\_\_

Send Check to Attention of: \_\_\_\_\_

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

City / State / Zip \_\_\_\_\_