



11th Annual PANTHER SHOOTOUT Tournament

Team Application Form



Application Instructions

Applications are now being accepted for entrance into the Panther Shootout Tournament on Friday/ Saturday 23/24 November 2007. All teams that have submitted an application will be notified 30 days prior to the tournament of their status and any applications received after that date will be notified within 24 hours of their status.

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 AYSO 2007 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-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.
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-16	\$350	\$150	\$500
	U-14	\$350	\$150	\$500
	U-12	\$325	\$150	\$475
	U-10	\$300	\$150	\$450

Send your completed application and Regional Check to:

Tournament Registrar
Panther Shootout Tournament
1801 Seabreeze Ct
Newbury Park, California, 91320

If accepted, it will be assumed that you intend for your team to play the entire tournament, and to return if necessary on the rainout alternative dates (in the event that becomes necessary).

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 30 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 any cost to register that replacement team.

All information about the tournament can be obtained by visiting our website at www.aysoregion42.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 newsletter once your application is received. In the meantime, if you have any further questions, you may contact us as follows:

Steve McDaniel (805) 405-7805
E-mail: MCDANIELSOCCER@YAHOO.COM
Web site: www.aysoregion42.org



11th Annual Panther Shootout Tournament

Team Application Form



Application Date: _____

Section: _____ Area: _____ Region #: _____ Region Name: _____

Team Name: _____

Age Division: _____ U-10 _____ U-12 _____ U-14 _____ U-16 _____ Boys _____ Girls _____

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 Head Coach Approval:

Yes, I have read the tournament rules and I promise to abide by them. I also am committed to returning on the alternative dates should the tournament be rescheduled due to inclement weather, etc.

Coach Signature

Regional Commissioner Approval: Yes, the above team has my permission to attend the All-American Tournament. 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 _____