

23rd 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 2018. Teams will be accepted based on the needs of the Tournament. AYSO United teams will not be accepted.

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 72 hours of their status.

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. Only Blue Sombrero Rosters accepted!

Roster Notes:

- It must include the names of the Head Coach and Assistant Coach and be signed by your Regional Commissioner.
- Rosters must include jersey # and be sorted in Jersey # order to match game cards.
- 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 and played in the AYSO 2018 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:

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

- A completed Referee Nomination Form must be signed by your Regional Referee Administrator if you are going to supply a referee.
- 4. A Regional check for the total amount of the Team Entry Fee.

Team fees are:	Age Division 14U	Team Entry Fee \$500	Referee Fee No Fee	Total Fee \$500	
	12U	\$475	No Fee	\$475	
	10U	\$450	No Fee	\$450	
Send your completed application and Regional Check to:			Tournament Regist Attn: Cian Hawkins		
	Panther Shootout Tournament				
			PO Box 709		
			Newbury Park, CA 91319-0709		

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.

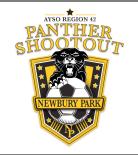
We will be sending out information via email newsletter once your application is received. In the meantime, if you have any further questions, you may contact us as follows: Tournament Director: Cian Hawkins E-mail: aysocian@gmail.com

Web site: www.aysoregion42.org



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Team Application Form



Application Date:

Section:	Area	a: F	Region #:	Region Name:
Team Name:				
Age Division:	10U 12U	14U		Boys Girls
			Contact Info	ormation
Coach Name:				Asst. Coach Name:
Email:				Email:
Mailing Address	:			Mailing Address:
City/State/Zip:				City/State/Zip:
Evening Phone	Number:			Evening Phone Number:
Emergency Pho	ne Number:			Emergency Phone Number:
AYSO ID#:				AYSO ID#
Certification Lev	el:			Certification Level:
Safe Haven Dat	e:			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 Panther 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: