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Sponsored by AYSO Region 65 Rancho Cucamonga, California

# 2020 Annual AYSO Grape Stomp Tournament Team Application Form

### **Application Instructions**

Applications are now being accepted for entrance into the AYSO Grape Stomp Tournament. The tournament is scheduled for March 7<sup>th</sup> & 8<sup>th</sup> 2020, with rain out dates of April 4<sup>th</sup> & 5<sup>th</sup>, 2020.

The deadline to enter the tournament is **February 16th, 2020**. 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, a Blue Sombrero 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 February 23<sup>th</sup>, 2020; after that, no roster changes. All roster changes must also be approved by your Regional Commissioner and submitted with new signatures. NO EXCEPTIONS
- Rosters must be comprised solely of players who were registered and played in the AYSO 2019 primary program.
- Player roster limits are as follows:

U-19/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 and Area 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 region 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
	Ŭ-19/U-16	\$525	\$300	\$825
	U-14	\$525	\$300	\$825
	U-12	\$475	\$300	\$775
	U-10	\$425	\$300	\$725

Send your completed application and regional check to:

Tournament Registrar

AYSO Grape Stomp Tournament

11944 Candlewood St

Rancho Cucamonga, Ca. 91739

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 within 48 hours of your decision.

**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 <a href="http://rcgrapestomp.org">http://rcgrapestomp.org</a>

Please note that e-mail 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:

Lisa Smith

E-mail grapestomp.r65@gmail.com Web site <a href="http://rcgrapestomp.org">http://rcgrapestomp.org</a>

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## 18<sup>th</sup> Annual AYSO Grape Stomp Tournament

## 2020 Team Application Form

						Application	Date:
Section:	Area:		Region #:		Region Name	e:	
Team Name:						·	
Age Division: _	U-10	U-12	U-14	U-16	U-19	Boys	Girls
			Contact	Information			
Coach Name: _				Asst. Co	ach Name:		
E-mail:				E-mail:			
Mailing Address:				Mailing A	Address:		
City/State/Zip:				City/Stat	e/Zip:		
Cell Phone Numb	oer:			Cell Pho	one Number:		
Game Day Phone	Number:			Game D	ay Phone Numl	ber:	
AYSO ID#:				AYSO IE	)#		
Training Level:				Training			
Safe Haven Date:				Safe Hav	ven Date:		
CDC Date:				CDC Da	te:		
Team Rating Crit	eria:						
1) We are an All S	Star/Select or Extra	team			_All Star _	Select _	Extra
2) We are a Fall re	egular season tear	n			_Yes		
3) My team compe	etitive rating betwe	en 1(low) and	d 10 (high) is:				
4) The average ag	_						
Team Head Coac		5 01 0a11 1 202	20 10.		<del></del>		
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Yes, I I	have read the tour	nament rules	and I promise to	abide by the	m. I also am co	mmitted to retur	ning on the
	tive dates should						3
Coach Signature							
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Regional Commis Please report any	• •		•	permission t	o attend the 20	115 Grape Stomp	Tournament.
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RC Signature		RC EM/	AIL				
The Referee Refu	and Check should	I be mailed to	0:				
AYSO Reg # /Trea	asurer Name						
Mailing Address:							
City / State / Zip							
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