



Sponsored by AYSO Region 31
Diamond Bar, California

17th Annual AYSO Cottontail Country Classic



Application Instructions

Applications are now being accepted for entrance into the 17th Annual AYSO Cottontail Country Classic.

The deadline to enter the tournament is **March 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 April 14th 2010; 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 2009 primary program.
- No guest players allowed.
- 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 Referee Administrator.
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
	U-19/U-16	\$500	\$200	\$700
	U-14	\$500	\$200	\$700
	U-12	\$500	\$200	\$700
	U-10	\$425	\$200	\$625

Send your completed application and regional check to:

Tournament Registrar
AYSO Cottontail Country Classic
1353 Crestmont Drive
Diamond Bar, California, 91765

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 www.dbayso.org

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

if you have any further questions, you may contact us as follows: Lisa May, tournament registrar (909) 556-8917

E-mail ccc_registrar@dbayso.org

Web site www.dbayso.org

For those returning, and those who are considering the Cottontail Country Classic for the first time, on behalf of Region 31, thank you in advance for your application for our tournament. We look forward to seeing you in Diamond Bar.

Rich Donohue & Sharon Ellis
Co-Tournament Director 2010 AYSO Cottontail Country Classic



17th Annual AYSO Cottontail Country Classic

Team Application Form



Application Date: _____

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

Team Name: _____

Age Division: _____ U-10 _____ U-12 _____ U-14 _____ U-16 _____ U-19 _____ Boys _____ Girls _____

Contact Information

Coach Name: _____ Asst. Coach Name: _____

E-mail: _____ E-mail: _____

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# _____

Training Level : _____ Training Level : _____

Safe Haven Date: _____ Safe Haven Date: _____

Shirt Size: _____ AS AM AL AXL AXXL Shirt Size: _____ AS AM AL AXL AXXL

Team Rating Criteria:

- 1) We are an Allstar/Select Team, the only one from our Region. _____ Yes _____ No
- 2) We are an Allstar/Select Team, one of _____ teams in this age division from our Region. _____ Yes _____ No
- 3) We are a fall primary program 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. I also am committed to returning on the alternative dates should the tournament be rescheduled due to inclement weather, etc.

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 17th Annual Cottontail Country Classic. Please report any behavior problems to me immediately. I understand that players from outside my Region (Guest Players) are not permitted at any time.

Print Name

Signature (in red or blue ink only, please)

Email: _____ Best Phone: _____

The Referee Refund Check will be mailed to the RC or Treasurer:

AYSO Region # _____

Send Check to Treasurer: _____

Mailing Address: _____

City / State / Zip _____



17th Annual Cottontail Country Classic Referee Information Form



I plan to bring a referee team to the tournament Y/N: _____

Referee Information Form Date: _____

Region: _____ Team Name: _____

Coach Name: _____

Age Division: **U-10** **U-12** **U-14** **U-16** **U-19** **Boys** **Girls** **Coed**

Referee Team Contact Person

Name: _____ Email Address: _____

Day Phone: _____ Evening Phone: _____

Provide the following information for each referee.

- For "Badge Level", insert R = Regional, I = Intermediate, A = Advanced, N = National. Also the date they were certified at that level.
- In each box under "Center/Assistant/Boys/Girls", provide the highest level they are competent to referee (e.g. BU-10, GU-12, etc.)
- In "Player on Team", indicate if the referee has a child who is playing in the tournament on this team.

	Referee Name	Badge Level	Certification Date	Center		Assistant		Player on Team (Y/N)	Home Phone/ Email
				Boys	Girls	Boys	Girls		
1									
2									
3									
4									

Each referee will receive a tournament T-Shirt. Please indicate sizes needed. All sizes are Adult.

	XXL	XL	L	M	S
Number of Shirts Needed					

Regional Referee Administrator's Name

Phone Number

Email

By my signature below, I certify that all referees listed are trained and Safe Haven certified AYSO referees and qualified for officiating U-10 through U-14 games as indicated above.

RRA Signature and date (Blue ink please)

Area Referee Administrator's Name

Phone Number

Email

By my signature below, I certify that all referees listed are trained and Safe Haven certified AYSO referees and qualified for officiating U-16 and U-19 games as indicated above.

ARA Signature and date (Blue ink please)