** 2016 Apricot Jam – Tournament Application** 

**Girls- April 9 & 10, 2016 and Boys- April 16 & 17, 2016**

AYSO Region #:\_\_\_\_\_\_\_\_\_\_ Region Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age Division:U10 U12 U14  **Boys Girls**

Uniform Color\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COACH LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Coaches Information-type or print** **Asst. Coaches Information-type or print**

## Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AYSO ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AYSO ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Certification Level\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certification Level\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Safe Haven Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Safe Haven Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Coach E-mail**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Best team contact E-mai**l\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Best Coach contact phone #** (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_  **Best team contact phone** # (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

**Team Rating Criteria: NOTE- All questions are referring to the players 2015 League Season**

Please answer ALL Questions 1 thru 7.

1.) We consider our team to be and most of our players are from

 a.) A regular Primary league team\_\_\_\_\_ balanced by the region.

b.) An All-Star team \_\_\_\_comprised of the best from each team Primary team

 c.) EXTRA team\_\_\_\_ chosen by try-outs and played in your Sections Extra League

 d.) Challenge team\_\_\_\_ chosen by try outs and played in the Club circuit.

 e.) Select/Tournament Team \_\_\_\_\_ chosen based on skills.

2.) If your region has more than one Tournament team in your division, where does your team rank? \_\_\_\_\_\_\_ of \_\_\_\_\_\_\_ teams.

3.) Account for the type of team each player played for in the 2015 Fall; see Question #1 for player type.

 How many players played for a Primary ONLY\_\_\_\_ or Primary & All-star \_\_\_\_\_ or Extra\_\_\_\_\_ or a Challenge team\_\_\_\_\_?

4.) Please check next to all the programs your region has in your division: All-Stars Extra Challenge

5.) Based on age (as of August 2015), how many younger players (1st yr in division) and how many older players (2nd year in division)

 do you have? Younger\_\_\_\_\_\_Older\_\_\_\_\_

6.) How would you rate your teams level of play on a scale of 1 – 10, (1 being low and 10 being high)?\_\_\_\_\_\_\_\_

7.) Is your team preparing to be an Extra or Challenge team next Fall? yes\_\_\_no\_\_\_

**Roster must be an eAYSO generated roster in Jersey Order ONLY**

An eAYSO Team Tournament Roster sorted by Jersey number order and signed by the team’s Regional Commissioner is the only acceptable roster for the 2016 Apricot Jam. Rosters must show the Coach and Asst.Coach certified at the required level of age-appropriate training or higher, the CURRENT Safe Haven (completed after 6/2011) . If you bring Guest Players, please attach the Guest Player form to the EAYSO Jersey Order Roster. Max Number of players: U10-10 players, U12-12 players, U14-15players

**Regional Commissioner Approval:** Yes, the above team has my permission to attend the Apricot Jam Tournament.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Print Name | **RC Signature** (in red or blue ink only, please) |
| **RC Email:** |  | **RC Best Phone**: |  |

 **Print Clearly**

**Head Coach Signature** Yes, I have read the tournament rules and I promise to abide by them.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Head Coach Signature**

|  |
| --- |
| Registration Questions? Call (805)529-2411, email tournament@moorparkayso.org or visit our website [www.moorparkayso.org](http://www.moorparkayso.org) |

** 2016 Apricot Jam – Guest Player Form**

|  |  |  |
| --- | --- | --- |
| Borrowing Team Information: | Roster Date: |  |
| Region: |  | Region Name: |  |
| Coach Name: |  |  |  |
| **Age Division:** |  | **U-10** |  | **U-12** |  | **U-14** |  | **Boys** |  | **Girls** |  |  |

**Apricot Jam rules allow teams to bring up to 3 “Guest Players” when they are unable to recruit sufficient players from their own region. These Guest Players must be properly registered AYSO players who were registered to play in their home region for the 2015-16 primary season and have played in at least 50% of their League games.**

***(List In Order By Uniform Shirt No.)***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Shirt****#** | **Region****#** | Player ID # | Player’s NameLast, First (please print) | Age | Date of Birth | TelephoneIncluding Area Code |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

***By my signature below, I certify that all players on this roster are valid registered players in my region and are approved to join the above team and participate in this tournament:***

|  |  |
| --- | --- |
|  |  |
| **Guest Player(s) Regional Commissioner:** |  |
|  |  ***Print Name Signature (Red or Blue Ink)*** |
| **Email:** |  | **Best Phone:** |  |
|  |  |
| ***By my signature below, I approve that these*** |  | ***(number of players) guest players are*** |
| ***approved to join the above team and participate in this tournament:*** |
| **Host Team Regional Commissioner:** |  |
|  |  ***Print Name Signature (Red or Blue Ink)*** |