



Sponsored by AYSO Region 114 Long Beach, California



2024 AYSO Battle at the Beach Tournament Team Application Form

Application Instructions

Applications are now being accepted for entrance into the **2024 AYSO Battle at the Beach Tournament**.

The deadline to enter the tournament is **July 21, 2024**. 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 Official Roster form generated through the AYSO E4 Association platform will be accepted, however it must include dates of birth, 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 are registered in the upcoming Fall 2023 AYSO 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:

2011	16	players	max	11-v-11 play
2012	16	players	max	11-v-11 play
2013	13	players	max	9-v-9 play
2014	13	players	max	9-v-9 play
2015	11	players	max	7-v-7 play
2016	11	players	max	7-v-7 play

3. The completed Referee Form signed by your Regional 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 team Zelle (ayso114TournamentDirector@gmail.com) OR team check (payable to AYSO 114 Battle at the Beach) for the total of all fees. The payment comment should indicate Team Division and Head Coach Name. Venmo available upon request for 2.5% fee.

Team fees are:	Age Division	Team Entry Fee	Referee Fee	Total Fee
	2011	\$575	\$250	\$825
	2012	\$575	\$250	\$825
	2013	\$575	\$250	\$825
	2014	\$575	\$250	\$825
	2015	\$575	\$250	\$825
	2016	\$575	\$250	\$825

Signed applications may be submitted by July 21st to AYSO114TournamentDirector@gmail.com, or via snail mail to:

AYSO 114 Battle at the Beach
4357 Hazelbrook Avenue
Long Beach, CA 90808

If accepted, it will be assumed that you intend for your team to play the entire tournament.

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 72 hours of your decision.

Refund: if you withdraw your application by July 21st, 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.ayso114.org.

Please note that e-mail and the website 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:

Jeff Schell

Ph: (562) 507-1341

Email: AYSO114TournamentDirector@gmail.com

Website: www.AYSO114.org



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2024 AYSO Battle at the Beach Tournament Team Application Form



Application Date: _____

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

Team Name: _____

Age Division: ☐ 2016 ☐ 2015 ☐ 2014 ☐ 2013 ☐ 2012 ☐ 2011

Gender Division: ☐ Girls ☐ Boys

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#
Coach AYSO Certification Level:	Coach AYSO Certification Level:
Safe Haven Completed <input type="checkbox"/>	Safe Haven Completed <input type="checkbox"/>
Concussion Awareness Completed <input type="checkbox"/>	Concussion Awareness Completed <input type="checkbox"/>
Sudden Cardiac Arrest Completed <input type="checkbox"/>	Sudden Cardiac Arrest Completed <input type="checkbox"/>
Sterling Background Check Completed <input type="checkbox"/>	Sterling Background Check Completed <input type="checkbox"/>
SafeSport Completed <input type="checkbox"/>	SafeSport Completed <input type="checkbox"/>
Live Scan Fingerprinting Completed <input type="checkbox"/>	Live Scan Fingerprinting Completed <input type="checkbox"/>

Team Rating Criteria:

- 1) We are an EXTRA™ Team ____Yes ____No.
- 2) We are the only team in our region in our age division: ____Yes ____No
- 3) My team competitive rating between 1 (low) and 10 (high) is _____

Team Head Coach Approval:

_____ Yes, I have read the tournament rules and I promise to abide by them.

_____ Yes, I understand that final pool play and medal round matches are on Sunday.

Coach Signature

Regional Commissioner Approval: Yes, the above team has my permission to attend the Battle at the Beach 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 Regional Commissioner Name

Regional Commissioner Signature (in red or blue ink only)

Email: _____

Best Phone: _____

The Referee Refund is prorated based on number of assignments fulfilled. Check should be mailed to:

AYSO Region # _____ Refund method: Zelle Venmo Check

Send Refund to (Name): _____ If Zelle/Venmo, account info: _____

If check, Mailing Address: _____

City / State / Zip _____