



2024 Apricot Jam – Tournament Application

Boys and Girls April 20th & 21st 2024



AYSO Region #: _____ Region Name: _____ Coach Last Name: _____

Uniform Color: _____ Team Name: _____

2023/24 Age Division: 10U 12U 14U Boys Girls

<u>Coaches Information-PLEASE type or print CLEARLY</u>	<u>Asst. Coaches Information-PLEASE type or print CLEARLY</u>
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-mail _____
Best Coach contact phone # (_____) _____	Best team contact phone # (_____) _____

Team Rating Criteria-Please answer ALL Questions 1 thru 8 as honestly as possible, this will help us balance the pools.

- 1.) We consider our team to be _____ Choose from below (a-d)
 - a.) All-Star team – chosen as the “best” players in their division.
 - b.) EXTRA League team - chosen by try-outs and played in the Sections 2023 Fall Extra League Program.
 - c.) Tournament/Select team- chosen by try-outs and/or based on skill.
 - d.) Tournament/Select team- balanced by the Region.
- 2.) Considering 2023/24 season how many players played on
 an All-Star team? _____ an Extra team? _____ United team? _____ “Club” team? _____
- 3.) How many players do you have in each of the following categories? Account for each player on your team.
 _____ Exceptional players will be a deciding factor on a win or loss - their absence would definitely have a negative impact on the team.
 _____ Average players will contribute to a win more times than not - their absence may have a negative impact on the team.
 _____ Less than Average players do not contribute to a win - their absence most likely will not have a negative impact on the team.
- 4.) If your region has more than one tournament team in your division, where does your team rank? _____ of _____ teams.
- 5.) Please check next to all of the programs your region has available in your division: All-Stars Extra United
- 6.) Rate your teams ability on a scale between 1-5. 1(low), 3 (average) and 5 (high) _____
- 7.) Is your team preparing to be an Extra or United team next Fall 2024? yes _____ no _____
- 8.) List all tournaments that you have attended or plan to attend. Please include placement and results, Region and Coach names are very helpful when we are comparing teams performances. Scoreboards welcome. Use backside if needed
 NOTE: You will be asked for an updated rating and tournament history about 30 days before the tournament.

Roster- The only acceptable roster for the 2024 Apricot Jam must be from **Membership Year 2023/24, generated from eAYSO or Sport Connect “AYSO Team Tournament Roster Report”**, sorted in **Jersey order** and signed by the team’s RC. Rosters must show the Coach and Asst. Coach both certified at the level of the team that they are coaching, the CURRENT Safe Haven date.
Max Number of players: 10U-10 players, 12U-12 players, 14U-15 players.

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

_____ Print Name _____ RC Signature (any color but black, please)

RC Email: _____ RC Best Phone: _____

Print Clearly

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

Registration Questions? Email Tournaments@Moorparkayso.org or visit our website www.moorparkayso.org
MAIL COMPLETE APPLICATION & CHECK to: Apricot Jam 12954 View Mesa, Moorpark, Ca. 93021



Apricot Jam – Guest Player Form

**ONLY to be used when Borrowing players from a Region other than your own.
All players from with-in your region MUST be on the approved Sport Connect or E4 roster**

Borrowing Team Information:

Roster Date:

Region: _____	Region Name: _____
Coach Name: _____	
Age Division:	10U 12U 14U Boys Girls

Tournament 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 AYSO registered for the 2023 Membership year.

(List In Order By Uniform Shirt No.)

Shirt #	Region #	Player ID #	Player’s Name <small>Last, First (please print)</small>	Age	Date of Birth	Telephone <small>Including Area Code</small>

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)*