

AURORA CLASSIC CUP



Team Responsibilities Agreement

Name of Coach: _____

Name of Team: _____

Age Division: **U9 U10 U11 U12 U13 14** **U15 U16 U17 U18 U19**

Boys or Girls (circle one): **Boys / Girls** **Boys**

- i. I will be responsible for the behavior and conduct of my team's coaches, players, and supporters;
- ii. I will know and strictly abide by the tournament rules.
- iii. I will submit all required documents for team check in within the required timeframes.
- iv. I will have proper and complete documentation for all guest players.
- v. As a competitive team, I will bring 3 copies of the stamped official roster from state association to the tournament. I will work with my association and registrar to make sure all guest players fill out the Quest player form.
- vi. As a recreational team, I will play with rosters provided by my state soccer association.
- vii. As a team traveling from out of Region IV, I will submit travel papers from my state association to the Tournament Director by June 28, 2019. (Region IV states include AK, AZ, CA, CO, HI, ID, MT, NV, NM, OR, UT, WA and WY)
- viii. As a team playing in a competitive division, I will bring player cards issued for all players by CYS or my own state office stamped and signed by the state registrar. Recreational player cards can come from their local registrar. No player will be allowed on the field without a current player card.
- ix. I will bring/upload ACC medical release for EVERY player on the roster, including guest players.
- x. I will adhere to roster size and guest player rules: U9 - U12 roster max of 14, with max 4 guest players. U13 & U14 roster max of 16, with max 4 guest players. U15 - U19 roster max of 18, with max 4 guest players.
- xi. I will review these responsibilities with my team's coaches, players, and supporters; I will remind my team's coaches, players, and supporters throughout the tournament.

Coach Signature: _____ Date: _____