

Monday, January 23, 2006

2006 BOYS PLANTATION CUP OPEN INVITATIONAL TOURNAMENT



WWW.STCHARLESSOCCER.ORG

- **BOYS Division 1 & Rec - Tournament - APRIL 7-9 2006**

Greetings Soccer Team Coaches, Managers & Players,

Thank you for your interest in participating in our 2006 Plantation Cup Invitational Tournament to be played at our Soccer Complex @ JB Martin School in Paradis, LA. *This will be your last opportunity to "tune-up" before the State Nokia Cup Tournament!* Out of state (USYSA) D1 & Rec teams from Texas, Mississippi, Florida, and Alabama will be accepted. These teams must provide an official Travel Permit. We prefer to send out Tournament info by EMAIL, and post on our WEB SITE, but if you prefer USPS mail please make a note on your application.

This year the tournament will include a U11/U12 Small Sided format, and U13-U19 brackets. *A combination of age brackets will be required if there are not enough teams to have age perfect brackets, i.e. U11/U12, U13/U14, etc. We will attempt to accommodate pure age bracket play in the round robin portion of tournament. Recreational Teams will be placed in brackets with Division 1 teams if needed. There will be NO guarantee of pure recreation brackets.* The tournament will follow the rules & formats established by the Louisiana Soccer Association (LSA).

- **Application Deadline: March 24, 2006**

All applications received by due date will be considered for participation. Each bracket will be limited to the number of teams in each. Teams not accepted will be issued a full refund of all fees.

- **Fees are as follows:**

U-11 & U-12 SSG: \$300.00
U-13 through U-19: \$300.00



- Participation Awards to all.
- First & Second Place awards to all bracket winners.

These fees are non-refundable unless weather or other circumstances cause the cancellation of tournament. Administrative expenses will be deducted.

- **Your application must be completed in full and include the following:**
 1. A check made payable to "St. Charles Soccer"
 2. A signed USYSA / LSA approved team roster.
 3. Out of state teams must provide an official Travel Permit.
 - **Referees Needed:** Please consider participating in our tournament. Premium rates will be paid. Contact Steve Delk @ 985-783-2404, stevedelk@cox.net
 - Team check-in must be completed 1 hour prior to first scheduled game. **Upon check-in you must provide the following:**
 1. LSA Approved Medical Consent forms for all rostered players.
 2. Laminated USYSA Player passes for all rostered players & coaches.
 3. Official current roster.
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Boys Tournament Director: Bill Ballard, 985-764-0786, wjballard@cox.net
Mail Boys Applications to: ATTN: PLANTATION CUP
121 Dunleith Dr., Destrehan, LA 70047

2006 BOYS PLANTATION CUP OPEN INVITATIONAL TOURNAMENT APPLICATION


April 7-9, 2006


Mail BOYS Applications to:
(Received by: March 24, 2006)

Bill Ballard (Attn: Plantation Cup)
121 Dunleith Drive, Destrehan, LA 70047
985-764-0786, wjballard@cox.net

AGE GROUP:		U- _____	
<u>ENTRY FEES</u>	U11 \$300	U13 \$300	U16 \$300
Circle One	U-12 \$300	U14 \$300	U17 \$300
			U19 \$300

TEAM NAME	DATE
CLUB/ASSOCIATION:	STATE ASSOCIATION
COACHES NAME	HOME PHONE WORK PHONE CELL PHONE
MANAGERS NAME	HOME PHONE WORK PHONE CELL PHONE
ADDRESS (Coach / Manager, circle one) <u>To receive Mail</u>	Primary Colors (Jersey / Shorts)
EMAIL (Coach / Manager, circle one)	Alternate Colors (Jersey / Shorts)
**REFEREE Contact	**REFEREE Contact

Fall 2005 Record WINS: ____ LOSSES: ____ TIES: ____ TOURNAMENTS: 1st ____ 2nd ____ SEMIS ____

Spring 2006 Record WINS: ____ LOSSES: ____ TIES: ____ TOURNAMENTS: 1st ____ 2nd ____ SEMIS ____

Box

Please enclose the following:

1. Check payable to **ST. CHARLES SOCCER** for the appropriate amount.
2. Completed official LSA or your State Association roster.
3. Out of state Travel Permit if applicable.

My signature below certifies that the information on this application is true & accurate. I also agree to adhere and to follow all of the PLANTATION CUP Tournament rules as posted.

Signature & Title _____

Date _____

Date Received: _____	Plantation Cup Use Only	Travel Permit: _____	
Accepted Y _____ N _____	Check # _____	Roster: _____	League Initial: _____
Fee Received: _____	PACKET MAILED (EMAIL) Y _____ N _____		