



TWO (2) Days SOCCER TOURNAMENT & LIVE CONCERT EVENT at:
2801 Harford Road, Baltimore, MD 21218

Team Registration Agreement & Application

Welcome to Community Cup USA Soccer Tournament & Concert, 2015. This tournament format offers ample opportunity for excellent soccer competition with three (3) games guaranteed to each participating team.

Applications will be accepted on a **FIRST -COME, FIRST - SERVED** basis, as by registration or **POSTMARK** date. We look forward to seeing you at the games for another year of friendly competition!

TOURNAMENT INFORMATION

Tournament Dates:	Friday	September 25, 2015	Check In / Set Up Day
	Saturday	September 26, 2015	Round Robin Qualification/Eliminations
	Sunday	September 27, 2015	Elimination Playoffs /Finals

Application & Fee Schedule:

We are offering a promotional deadline for application submitted by September 15, 2015; however, late registrations are subject to availability and increase of registration fees. Team applications and rosters are due at least by September 15, 2015; all other applications and rosters may be considered late and charged as such, as follows:

Promotional Deadline for team registration fee:	\$250 per team
Late Registration fees:	\$300 & Up per team

Installment plan for team registration payment is accepted for a minimum amount of \$50; however, full payments for team registration fees **MUST BE** made on or before date of the games, 2015. **NO REFUND.**

A Money Order or PayPal payments online at www.communitycupusa.com website accepted with credit/debit card; Make Money Order checks payable to **Community Cup USA**. Note: As indicated in the deadline schedule, each team’s roster is due by September 15, 2015. No signatures are required; players can do that at the tournament. Team managers must include player’s birthdates, using the **roster form provided.**

Application Mail-In Address: [Community Cup USA | 207 W. Saratoga Street | Baltimore, MD 21201](#)

Tournament Contact: Gus Nyeswah communitycupusa@gmail.com | 443.983.3968

Tournament Location: **2801 Harford Road, Baltimore, MD 21218**

Site maps will be provided along with an acceptance letter

You may designate first, second or third division preference on your application; we will try to accommodate your first choice. Note: The Community Cup USA Director reserves the rights to place teams as deemed appropriate.

Number of Games:	Three (3) games guaranteed; 3 fields/ 6 teams
Team Size:	at least 7 players can start any game; and up to 20 players per team roster
Game Length:	45 minutes/ 10 halves or as see fit by officials of games



In order to maintain the tournament schedule, penalty kicks will be used to break tie games during playoffs or championship games. **No Overtime.**

- Rosters:** - Initial roster at least 7 and up to 18 players due by September 15, 2015, for early registration.
- **Late registration is subject to availability; and increment of team registration fees**

Note: Signatures are not required prior to the tournament date; team members' birthdates must be included on roster. Once initial roster has been submitted, teams will be allowed a maximum of ten (10) player replacements, add or drop a prior to the closing time of team registration time; check-in at 8:00 am on Saturday, September 26, 2015. For your convenience, these **changes on roster may be made via email prior to registration/check-in time, to communitycupusa@gmail.com.**

Changes to a roster may NOT be allowed when tournament games start.

Once a player has registered/check-in/ and participated in a tournament match, that player may not be replaced on the roster. **However, community cup USA Director or officials of the games reserve the rights to make exceptions in the case of injury, amongst other reasons.**

Team Confirmation: A confirmation by email will acknowledge that your application packet was received. Incomplete application packets could be placed on a waiting list. **Be sure to include tournament application, fees and team roster.**

Team Acceptance: Team acceptance letter will be emailed, daily or weekly. A follow up email including schedules, maps and other pertinent tournament details will be posted and available online. Once a team has been accepted, refunds WILL NOT Be issued. Teams that are not selected may elect to: (1) receive an immediate refund in full or (2) request placement on a waiting list in the event an opening occurs. Teams not selected to play in the tournament, will be issued a full refund NO later than two (2) weeks after the tournament.

Other Notes:

1. We are concerned about the safety of all players. If you plan to wear a knee brace, please remember that hard surfaces must be covered by ¼ inch closed-cell slow recovery rubber or equivalent material (neoprene sleeves).
2. Jerseys must have numbers on the back. Alternate jerseys with numbers are required.

Please return enclosed application form; completely fill out, along with the fees, roster and all other documents by email at communitycupusa@gmail.com or to:

Community Cup USA
207 W. Saratoga Street, Baltimore, MD 21201

We will try to accommodate all teams with their first division choice, with consideration given to optimize playoffs bracketing, field usage and maximum number of participating teams.

Thank you; and we look forward to your team's participation.

Director, Community Cup USA

Please fill out this application, completely, and return same by email along with all requirements.

**TOURNAMENT APPLICATION****Promotional Deadline ends:** By September 15, 2015, application fee / \$250

All other team registration/Application considered late at a fee of \$300

TEAM NAME	
TEAM ALIAS <i>(list any other teams names)</i>	
PLAYER SKILLS LEVEL	Will your roster include current college-level players? Yes___ No___ If Yes, you must disclose the name(s) of the player(s). <i>(A star by the player's name on the roster is sufficient.)</i>

TEAM MANAGER'S NAME	
ADDRESS	
CITY / STATE / ZIP	

HOME PHONE:	CELL PHONE:
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EMAIL	
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*(For tournament communication only; will not be distributed)***AFFILIATIONS**

LEAGUE:	DIVISION:
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LEAGUE CONTACT NAME/PHONE	
IS YOUR TOURNAMENT TEAM THE SAME AS YOUR LEAGUE TEAM	Yes___ No___ .If No, please tell us in detail how it is different. <i>(Write on the back if necessary or include in an email to the Committee.)</i>

TEAM INFORMATION

Average years of players' experience in this tournament.	
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Please provide standings for the last two seasons and the current league season.

Tournaments competed in (if any) and positions finished.	
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UNIFORM COLORS (jerseys/shorts/socks)	
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ALTERNATE UNIFORM (jerseys/shorts/socks)	
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*Teams with players younger than 18 years old must have a waiver signed by a parent/guardian in order to play (no exceptions); players must be 16 years old by March, 2015

If your team is not selected for this tournament, would you like to be placed on a *waiting* list?

Yes___ No___

(Please indicate your choice). Thank you.

Coach / Team Manager Signature (optional)