



September 1, 2010

Dear Coach/Manager,

Welcome to the 2010 Autumn Classic Soccer Tournament!

Enclosed please find a T-Shirt preorder form, a site map, a referee interest form, and a field roster form. The final tournament schedule will be posted on the TBAYS website ([www.tbays.org](http://www.tbays.org)) by Monday, Sept. 13. **Please note the schedule will not be sent either by mail or email.** U-9/10 will play 6 v 6 format U-11/12 will play 8 v 8 format, U-13 and up will play 11 v 11 format.

At the time that the schedules are posted on the website, we will also post your team's check-in time at the Keystone Soccer Complex. The time will be based on your first game and will be no less than ½ hour before your first game. It may be as much as 2 hours before your 1<sup>st</sup> game. If you are playing early on Saturday morning, your assigned check-in will be on Friday night. Please be sure you don't miss your scheduled appointment or we can't guarantee that your team will be able to take the field on time for their first game. If you don't have access to the website, you may call our office at 231 933-8229 to get your check-in appointment time. At your option, your team check-in may be done on Friday, Sept 17 between 4:00pm-7:30pm instead of at your appointment time. The players are not required at check-in, only the coach or business manager. Please remember to bring the following items when you check-in:

- |                                                                    |                                                        |
|--------------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Player Passcards                          | <input type="checkbox"/> Completed Field Roster        |
| <input type="checkbox"/> Medical Release Forms                     | <input type="checkbox"/> Coaches Risk Management Cards |
| <input type="checkbox"/> MSYSA Tournament Guest Player Permission* | <input type="checkbox"/> Certified Team Roster         |

If you are using Mapquest or your GPS system to locate the Keystone Soccer Complex, the address to use is 712 N. Keystone Rd.

We will not be banding the players. Coaches will retain their player's passcards which must be presented along with their risk management cards before each game. Only three coaches will be allowed on the sidelines for each game and both must have their risk management cards in their possession.

**We would like to remind you that pets are not allowed at our facility and that there is no overnight camping, (including RV's) on the grounds. Also, please no parking along the road next to the railroad tracks. Cars will be towed at the owner's expense. We appreciate your cooperation.**

If you have any questions, please call the TBAYS office at (231) 933-8229. Thank you, welcome and good luck. We hope you will enjoy our tournament as much as we enjoy hosting you!

Sincerely,

Thomas Singer, Tournament Director

**\* If you have guest players, you MUST register these players with MSYSA through their website at [www.michiganyouthsoccer.org](http://www.michiganyouthsoccer.org) and provide TBAYS with documentation at check-in.**

# **ATTENTION COACHES!**

**We have made a few changes in game time procedures.  
Please be sure to  
familiarize yourself with these changes:**

The HOME team for each game will present the center referee with the game card for that match prior to taking the field. You will also give the refs vouchers that they will need in order to get paid at the end of the tournament. You will receive these game cards and vouchers at the time of check in.

**The WINNING team coach from each match is responsible for submitting the game card to the scoring tent located in the middle of the park to ensure proper and timely score posting.**

No team may forgo check in. It is imperative that team staff properly register and check in their team(s). Registration will still take place at the front of the park.

Failure to follow these procedures may result in dismissal from the tournament or forfeiture of games.

Thank you for your cooperation and for your attendance at the 2010 Autumn Classic!

# REFEREE ASSIGNMENT INFO SHEET

Qualified USSF registered Officials sought for September 18-19 for the Autumn Classic! We will try to schedule referee assignments so that they will not conflict with other tournament games with which an individual is otherwise involved. Please provide the appropriate information about team affiliation on the form below.

Name \_\_\_\_\_ Age \_\_\_\_\_  
Street Addr. \_\_\_\_\_  
City, St., Zip \_\_\_\_\_  
Phone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
E-Mail Address \_\_\_\_\_  
USSF grade/class \_\_\_\_\_ Years' experience \_\_\_\_\_ Age Group Comfort Level \_\_\_\_\_

**Assignment preferences:** Younger boys  /  Older boys  No preference  
Younger girls  /  Older girls

**Team Affiliations:**

Team name	Age bracket
_____	_____
_____	_____

Check here for no team affiliation

**Availability:** Friday  Saturday  Sunday  Monday  check all that apply

Maximum number of games you wish to referee each day:

Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_ Monday \_\_\_\_\_

Do you require housing? Yes  No

Additional Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Return completed  
form to:*

TBAYS  
ATTN: Director of Referees  
160 Hughes Dr.  
Traverse City MI 49686  
FAX: 231 933-6629

or contact Tom Spencer  
referees@tbays.org

**Coaches: This is your official Tournament Roster. Type or clearly print your players' names, jersey number, and birth dates. Bring this form to Check-in on Friday evening. Use an asterisk to denote a guest player (maximum of 4 guest players allowed for U11-U18 and 3 guest players for U9-U10). If you are bringing guest players, then MSYSA Guest Player authorization and valid player cards are required.**

# TBAYS Tournament Field Roster

**Team Name:** \_\_\_\_\_ **Girls/Boys Div:** \_\_\_\_\_

**League Name:** \_\_\_\_\_

**Coach:** \_\_\_\_\_ **Phone:** (     ) \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

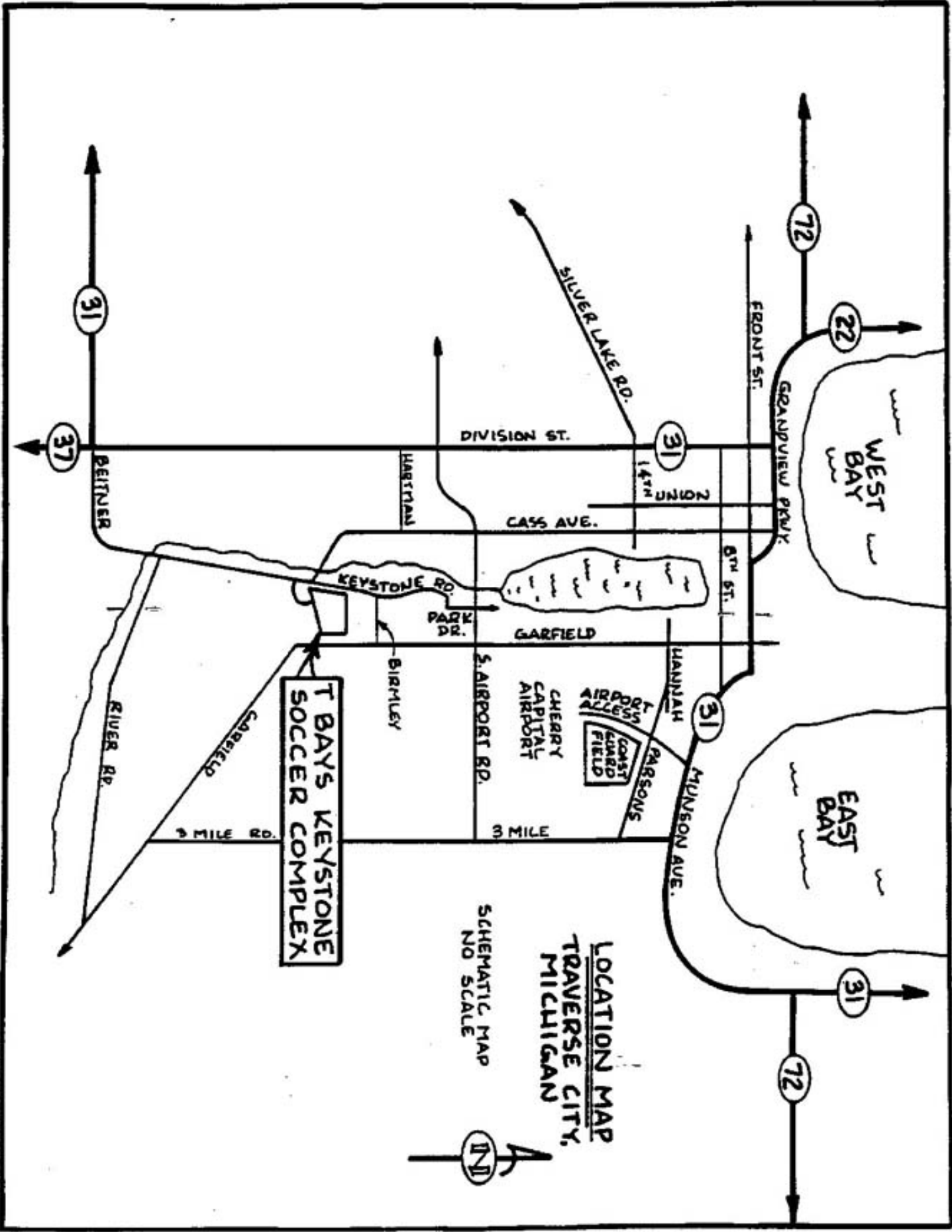
**Manager:** \_\_\_\_\_ **Phone:** (     ) \_\_\_\_\_

**Local Hotel:** \_\_\_\_\_ **Phone:** (     ) \_\_\_\_\_

*MR	*PC	*G	Player's Name Please List Alphabetically	#	Birth Date
			1		
			2		
			3		
			4		
			5		
			6		
			7		
			8		
			9		
			10		
			11		
			12		
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			14		
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			17		
			18		

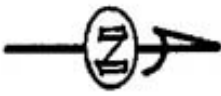
**\* FOR CHECK-IN USE ONLY**

**MR-MEDICAL RELEASE    PC-PASS  
CARD    G-GUEST PLAYER**



**LOCATION MAP  
TRAVERSE CITY,  
MICHIGAN**

SCHEMATIC MAP  
NO SCALE



# Autumn Classic 2010

## Pre-Tournament T-Shirt Order Form

Pre-Tournament shirt prices using this form: Short Sleeve \$14, Hoodies \$22  
 (On-Site Tournament Prices will be \$16& \$25)  
 Shirts onsite will be available in Heather Grey, Black, and Orange Tie Dye



Option **1**

	Short Sleeve Black	Short Sleeve Heather Grey	Short Sleeve Orange Tie Dye	Hoodie Black	Hoodie Heather Grey
Kids M					
Kids L					
Adult S					
Adult M					
Adult L					
Adult XL					

Team Name \_\_\_\_\_

Coach \_\_\_\_\_

Age Group \_\_\_\_\_ Boys or Girls \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_

Short Sleeve Total @ \$14 each \_\_\_\_\_

Hoodies Total @ \$22 each \_\_\_\_\_

Total Amount of Check \_\_\_\_\_

Make checks payable to **TBAYS** and mail to :  
**TBAYS**

160 Hughes Dr.  
 Traverse City MI 49686

**Orders must be received by Sept. 10**