



*You Are Cordially Invited To The  
28th Annual Valley Cup Women's Soccer Tournament  
May 16-17, 2009  
Cherry Island Soccer Complex  
Sacramento, California*

We are pleased to announce our 28th Annual Valley Cup Tournament. The tournament format offers ample opportunity for excellent soccer competition, with four games guaranteed to each participating team.

Applications will be accepted on a FIRST-COME, FIRST-SERVED basis, according to the POSTMARK DATE. As in the past, we anticipate that space will fill quickly, so please return your response promptly. We look forward to seeing you in May for another year of friendly competition!

### ***TOURNAMENT INFORMATION***

**Dates:** Saturday, May 16, 2009: Round Robin Qualification  
Sunday, May 17, 2009: Elimination Playoff

**Fee Schedule:** We have incorporated two deadlines with a tiered fee schedule. Postmarks are controlling. For the February deadline, payment must accompany the application; applications without payment will be subject to the greater fee.

**February 28 Deadline \$495 per team**

**March 17 Deadline \$550 per team**

A check for full fee amount is required with the application form. Make checks payable to Valley Cup/SVWSL. **Note: As indicated on the back and in the cover letter, each team's roster must be included with your tournament application. No signatures are required; players can do that at the tournament. Please include birthdates.**

**Tournament Address:** \*\*\*This is my residence; be sure to put Deidre Bryant on the envelope\*\*\*  
502 Cranberry Lane, El Dorado Hills, CA 95762

**Tournament Contact:** Deidre Bryant, Valley Cup Chair  
(916) 551-3991, valleycup@svwsl.com  
www.svwsl.com

**Application Deadline:** February 28: \$495 \*\*\*\*\* March 17: \$550  
**Roster deadline is March 17, 2009. Limited slots available, please apply early.**

**Team Size:** No less than 14 and no more than 18 players

**Tournament Location:** Cherry Island Soccer Complex in north Sacramento  
Maps will be provided with acceptance letter.

**Divisions:** Based upon interest/entries, the divisions are:  
Competitive  
Recreational A, B, C, D  
Over 30 A, B, C  
Over 40 (may have two players between 35 and 40 years old)  
Over 50 (may have two players between 45 and 50 years old)

Please designate first, second, and third division preference on your application; we will try to accommodate your first choice. Note: Any team that has placed first or second in the same division of play for the past two years may be placed in the next higher division. The Valley Cup Committee reserves the right to place teams as deemed appropriate.

**Number of Games:** Four (4) games guaranteed.

\*\*\*Continued on next page\*\*\*

**Game Length:** Saturday: A maximum of 25-minute halves.  
Sunday: Playoff games thirty (30) minute halves with five-minute breaks. In order to maintain the tournament schedule, penalty kicks will be used to break tie games during playoffs (no overtime). Round robin or pool play games are still 25-minute halves.

**Rosters:** An initial roster with a minimum of 14 players and maximum of 18 players must be included with your application. *Note: Signatures are not required on the roster prior to the tournament; please include birthdates.* Once initial roster has been submitted, teams will be allowed a maximum of five player replacements (drop and add) or additions prior to the close of registration/check-in at 4:00 pm on Saturday, May 16, 2009. For convenience, these changes may be made via e-mail prior to registration/check-in (valleycup@svwsl.com). **Roster deadline is March 17, 2009.**

Changes to the roster will not be allowed on Sunday.

Once a player has registered/checked-in/participated in a tournament match, that player may not be replaced on the roster. However, the Valley Cup Committee reserves the right to make exceptions in the case of injury.

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

**Team Acceptance:** Team acceptance letters will be emailed by the end of March. A follow-up email, including schedules, maps, and other pertinent tournament details, will be available online by May 1. **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 placed in the tournament will be issued a full refund no later than the completion of the tournament.

**Other Notes:**

1. We are concerned about the safety of all our players. If you plan to wear a knee brace, please remember that hard surfaces must be covered by 1/4-inch closed-cell slow recovery rubber or equivalent material (neoprene sleeve).
2. Jerseys must have numbers on the back. Alternate jerseys with numbers are required.

***Please return enclosed application form, fees, and league standings to:***

Valley Cup Tournament  
c/o Deidre Bryant  
502 Cranberry Lane  
El Dorado Hills, CA 95762  
(916) 551-3991  
valleycup@svwsl.com  
www.svwsl.com

On the enclosed application, please be sure to indicate if you would like to be placed on a waiting listing should your team *not* be selected by the **March 17, 2008**, application deadline.

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

Thank you, and we look forward to your team's participation!

***Valley Cup Committee***



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**TOURNAMENT APPLICATION**

*Application Deadlines: February 28/\$495 or March 17/\$550*

TEAM NAME \_\_\_\_\_

TEAM ALIAS (list any previous team names or other team names you use)  
 \_\_\_\_\_

TEAM MANAGER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL ADDRESS (for tournament communication only; will not be distributed)  
 \_\_\_\_\_

***AFFILIATIONS***

LEAGUE \_\_\_\_\_ DIVISION \_\_\_\_\_

LEAGUE CONTACT NAME/PHONE \_\_\_\_\_

***TEAM INFORMATION***

Average years of experience of players on this tournament roster \_\_\_\_\_

Please provide standings for the *last two seasons* and the *current league* season.

TOURNAMENTS COMPETED IN (IF ANY) AND POSITIONS FINISHED  
 \_\_\_\_\_

UNIFORM COLORS (jerseys/shorts/socks) \_\_\_\_\_

ALTERNATE UNIFORM COLORS (jerseys/shorts/socks) \_\_\_\_\_

<b>DIVISION PREFERENCE</b>	<b><i>1st Choice</i></b>	<b><i>2nd Choice</i></b>	<b><i>3rd Choice</i></b>
COMPETITIVE *	_____	_____	_____

\*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 Friday, May 16, 2009.

RECREATIONAL	**Players must be 18 years old by Friday, May 17, 2009.		
Division A	_____	_____	_____
Division B	_____	_____	_____
Division C	_____	_____	_____
Division D	_____	_____	_____

OVER 30	***All players must turn 30 by December 31, 2009.		
Division A	_____	_____	_____
Division B	_____	_____	_____
Division C	_____	_____	_____

OVER 40 ****	_____	_____	_____
****With the exception of two players, all players must turn 40 by December 31, 2009. The exception: over 40s teams may have two players between 35 and 40 years old.			

OVER 50 *****	_____	_____	_____
*****With the exception of two players, all players must turn 50 by December 31, 2009. The exception: over 40s teams may have two players between 45 and 50 years old.			

**If your team is not selected by the March 17 deadline, would you like to be placed on the *waiting list*?**

Yes \_\_\_\_\_ No \_\_\_\_\_

# SACRAMENTO VALLEY WOMEN'S SOCCER LEAGUE 2009 VALLEY CUP ROSTER

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

Manager/Coach Name \_\_\_\_\_

Contact (if different than manager/coach) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Signature \_\_\_\_\_

Jersey Color \_\_\_\_\_ Shorts Color \_\_\_\_\_

## **Instructions**

1. Teams must pre-register with a minimum of 14 players to be eligible for the tournament. Players may sign the roster at the tournament.
2. Once initial roster has been submitted, teams will be allowed a maximum of five player replacements (drop and add) or additions prior to the close of registration/check-in at 4:00 p.m. on Saturday, May 18, 2009. For convenience, these changes may be made via e-mail prior to registration/check-in. Changes to the roster will not be allowed on Sunday. Once a player has registered/checked-in/participated in a tournament match, that player may not be replaced on the roster. However, the Valley Cup Committee reserves the right to make exceptions in the case of injury.
3. To be eligible to play, each player must read and sign the Waiver, Release, and Indemnity Agreement at tournament registration (on site Friday, May 15 at the headquarter hotel or Saturday and Sunday at the Cherry Island Soccer Complex).
4. At least one hour prior to the team's first scheduled game, each player is required to provide picture identification showing date of birth. A California's driver's license or a recognized league player pass with photo is acceptable (no exceptions).
5. Make a copy of the completed roster before sending the original with your application.

<b>PRINT NAME</b>	<b>BIRTHDATE</b>	<b>SIGNATURE</b> ( <i>at registration check-in</i> )
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		
6. _____		
7. _____		
8. _____		
9. _____		
10. _____		
11. _____		
12. _____		
13. _____		
14. _____		
15. _____		
16. _____		
17. _____		
18. _____		