Sponsored by AYSO Region 638, Quartz Hill, California

2025

AYSO Quartz Hill Kickmas

AllStar Tournament

Team Application Form

Application Instructions

Applications are now being accepted for entrance into the AYSO Quartz Hill Kickmas.

The deadline to enter the tournament is 14 days prior to the tournament. Applications received by **November 28th, 2025,** will be given priority for acceptance into the tournament; all others will be accepted based on any available openings. **Applications done online will be considered accepted unless waitlisted!**

Applications will be accepted on a first-come basis, based on a completed application.

1. Team Application Form, signed by the Head Coach and the Regional Commissioner.

2.Team Roster signed by your Regional Commissioner.

Roster Notes:

- A Sport Connect Roster is required and it must include the names of the Head Coach and Assistant Coach and be signed by your Regional Commissioner
- Roster changes will be allowed up until Team Check-in; after that, no roster changes. All roster changes must be approved by your Regional Commissioner.
- Rosters must be comprised solely of players who were registered and played in the AYSO 2025 fall program.
- Up to 3 guest players may be added to your roster from a neighboring AYSO Region. In this case, the guest player's Regional Commissioner must sign the roster.
- Player roster limits are as follows:

14-U	15 players max	11-v-11 play
12-U	12 players max	9-v-9 play
10-U	10 players max	7-v-7 play

The completed Referee Form signed by your Regional Referee Administrator (if you're not planning to bring referees, just check the box on the Referee Form and return it without the RRA signature). However, teams who provide qualified referee teams will be given first consideration.

A single region check for the total amount of the Team Entry Fee and the Referee Commitment Fee.

Checks to be made out AYSO Region 638

Team fees are:	Age Division	Team Entry Fee	Total Fee
	14-U	$700	$970
	12-U	$650	$920
	10-U	$600	$870

Send your completed application and regional check to:

AYSO Quartz Hill Kickmas
C/O Quartz Hill AYSO
P.O. Box 4955
Lancaster, California, 93539

If accepted, it will be assumed that you intend for your team to play the entire tournament, and to return if necessary on the rainout alternative dates (if becomes necessary).

If your application is not accepted, you will be offered the opportunity to be placed on a waiting list, or if you prefer we will mail back your application to you within 48 hours of your decision.

Refund: If you withdraw your application 30 or more days from the start of the tournament, a full refund will be issued. If you withdraw after that time, we will only issue a refund if a replacement team can be found, less any cost to register that replacement team.

All information about the tournament can be obtained by visiting our website at www.qhayso.638.org

Landon Pikkel – Tournament Director

661-992-8358 - E-mail QHshootout638@gmail.com
Web site www.qhayso638.org

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2025
AYSO Quartz Hill Kickmas

Team Application Form

Application Date: _____

Section: _____ Area: _____ Region #: _____ Region Name: _____

Team Name: _____

Age Division
(Choose one): _____10-U _____12-U _____14-U _____16-U _____19-U _____Boys _____Girls _____Coed

Contact Information

Coach Name: _____	Asst. Coach Name: _____
E-mail: _____	E-mail: _____
Mailing Address: _____	Mailing Address: _____
City/State/Zip: _____	City/State/Zip: _____
Evening Phone Number: _____	Evening Phone Number: _____
Emergency Phone Number: _____	Emergency Phone Number: _____
AYSO ID#: _____	AYSO ID# _____
Training Level: _____	Training Level:
Safe Haven Date: _____	Safe Haven Date: _____

Team Rating Criteria:

1) We are an Allstar/Select Team, the only one from our Region. _____Yes _____No
2) We are an Allstar/Select Team, one of _____teams in this age division from our Region. _____Yes _____No
3) We are an Extra Team, one of _____teams in this age division from our Region. _____Yes _____No
4) We are a fall primary program team. _____Yes _____No

5) My team competitive rating between 1 (low) and 10 (high) is
6) The average age of our players as of January 1, 2026 is

Team Head Coach Approval:

_____ Yes, I have read the tournament rules and I promise to abide by them. I also am committed to returning on the alternative dates should the tournament be rescheduled due to inclement weather, etc.

_____ I understand that all teams are guaranteed a minimum of 3 games.

_____ Yes, I understand that this is a 2-day tournament and that the medal round games are on the second day. I hereby notify you that I will NOT be able to complete the tournament for the following reason: _____

_____
Coach Signature

Regional Commissioner Approval: Yes, the above team has my permission to attend the Quartz Hill Shootout Tournament. Please report any behavior problems to me immediately. I understand that players from outside my Region (Guest Players) will need approval as well from the Guest Player Regional Commissioner. I hereby approve the addition of_____Guest Players for this team.

_____ _____
Print Name Signature (in red or blue ink only, please)

Email: _____ Best Phone: _____

Landon Pikkel – Tournament Director

661-992-8358 - E-mail QHshootout638@gmail.com
Web site www.qhayso638.org

The Referee Refund Check should be mailed to:

AYSO Region #

Send Check to Treasurer:

Mailing Address:

City / State / Zip

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