2019-2020 CSSA Cup Entry Form

Men’s Over-30 ____ Men’s Over-40 ____ Men’s Over-50 ____ Other____

MAJOR CUP ____ INTERMEDIATE CUP * ___
(*only if number of entries warrant it)

The following contact info must be typed and FILLED OUT COMPLETELY. TWO TEAM CONTACTS ARE REQUIRED. No incomplete, paper, Word-incompatible, or handwritten entries will be accepted:

<table>
<thead>
<tr>
<th>Team Name:</th>
<th>League &amp; Division:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Field:</td>
<td>Alternate Home Field:</td>
</tr>
<tr>
<td>Home Shirt:</td>
<td>Home Shorts:</td>
</tr>
<tr>
<td>Away Shirt:</td>
<td>Away Shorts:</td>
</tr>
<tr>
<td>Manager:</td>
<td>Email:</td>
</tr>
<tr>
<td>Home/Cell Phone:</td>
<td>Alternate Cell/Work Phone:</td>
</tr>
<tr>
<td>Asst. Manager:</td>
<td>Email:</td>
</tr>
<tr>
<td>Home/Cell Phone:</td>
<td>Alternate Cell/Work Phone:</td>
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</tbody>
</table>

A complete, electronic application is due to CSSA ON OR BEFORE:

Sunday, October 20, 2019

For this year’s competition, we will use your official CSSA LEAGUE ROSTER as of Wednesday, September 25, 2019.

(ROSTERS ARE FROZEN FOR THE ROUND ROBIN PHASE)
Cup rosters will be frozen again on March 31, 2020; or, five days prior to knockout phase, whichever comes first.

(FROZEN FOR THE KNOCKOUT PHASE)

Cup Draw will be held ASAP after application deadline
Teams are not allowed to withdraw after the draw – that constitutes a FORFEIT.
Forfeit fines are listed in Additional Details and Instructions #6

SCHEDULE (“ON OR BEFORE” APPLIES AND IS ENCOURAGED):
(all KO are 10:00 AM unless stated below/both teams agree otherwise, with Committee OK)

Group phase match 1: Sunday, November 3 **** dependent on SASL schedule ****
Group match 2: Sunday, November 10
Group match 3: Sunday, November 17
Make-up dates: Sunday, November 24 thru early December, weather permitting.
Quarter Finals: SUNDAY, April 5, 2020 at home site of the higher seeded team.
Semi-Finals: SUNDAY, May 10 (Mother’s Day), 9:00 AM or 10:00 AM at home site of the higher seeded team. (9:00 AM Kick-Off time is approved by Committee.)
FINALS: SATURDAY, JUNE 6th (traditionally late afternoon, and early evening, kick-offs)
ADDITIONAL DETAILS AND INSTRUCTIONS

Prize money will be awarded, depending on the number of teams applying (no entry fee).

(1) Goal difference in Group phase play will be capped at a maximum of 5 goals.
(2) All players must be of age before first scheduled match, excepting goalkeepers, who may be aged 25+ (O-30 Cup), aged 35+ (O-40 Cup), or aged 45+ (O-50 Cup), and who cannot play in the field if underage.
(3) Initial rounds of play will be by GROUPS of FOUR, when possible. The Committee will round down the number of entries, if the total entered is not divisible by four, with last or lower priority entries eliminated. Exceptions may arise and are at the discretion of the Cup Committee.
(4) All players must be properly registered with your team, league and the CSSA, and must have passes.
Note: “guest players,” “club,” “combination” or “non-league teams” are not allowed in this year’s competition. YOUR LEAGUE ROSTER WILL BE USED.
(5) Home teams will pay for the two Assistant Referees @ $55.00 each. The visiting team will pay for the Head Referee @ $85.00. (This applies to all Cup matches.)
(6) Teams who forfeit a Cup match will be fined at this rate. **Refusing to play, before or during a match, is considered a forfeit,** per CSSA Rules:
   a) $100 for first or second game of Group Play
   b) $250 for third game of Group Play
   c) $350 for the QF and SF matches
   d) $500 for the State Cup Final
Teams that forfeit any Cup match will likely not be allowed to enter next year’s competition.
(7) All teams entering must secure home fields for all three group match dates as soon as possible to avoid scheduling conflicts and issues. **All home fields are subject to Cup Committee approval.**
(8) Teams with questionable CSSA-wide disciplinary records may not be admitted.

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**The CSSA Competition Committee is the sole arbiter of competition, participation, rules, scheduling, results, discipline, and in matters not provided for.**

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E-mail this form (page 1 only) to the CSSA Administrator Julia Connor at cssasecgen@gmail.com; and, also copy Dan Rooney, Committee Chairperson.

### STATE CUP COMMITTEE

<table>
<thead>
<tr>
<th>Name</th>
<th>Email address</th>
<th>Cell Phone</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dan Rooney</td>
<td><a href="mailto:danrooney2009@gmail.com">danrooney2009@gmail.com</a></td>
<td>N/A</td>
<td>Chair (ex-officio)</td>
</tr>
<tr>
<td>Jack Testani</td>
<td><a href="mailto:torrice1027@gmail.com">torrice1027@gmail.com</a></td>
<td>N/A</td>
<td>Member</td>
</tr>
<tr>
<td>Steve Henderson</td>
<td><a href="mailto:dawhendy@aol.com">dawhendy@aol.com</a></td>
<td>N/A</td>
<td>Member</td>
</tr>
<tr>
<td>Julia Connor</td>
<td><a href="mailto:cssasecgen@gmail.com">cssasecgen@gmail.com</a></td>
<td>N/A</td>
<td>Member</td>
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