

**A L B E R T C A M P B E L L**  
**A L L S T A R T O U R N A M E N T & F E S T I V A L**  
**September 23 & 24**

You are invited to participate in the Albert Campbell All Star Tournament and Festival to be held on **September 23<sup>rd</sup> & 24<sup>th</sup> 2017** The Tournament is open to **House League/Festival and All Star teams**. Your Club is invited to enter one or more teams in the following age divisions:

**Festival Teams**

**Mini Soccer Festival**

**GIRLS/BOYS**

(5 v 5)	Under 8	born on/after Jan 1 2009 (SSA)}	Entry fee \$150.00
(7 v 7)	Under 9	born on/after Jan 1 2008	Entry fee \$250.00
	Under 10	born on/after Jan 1 2007	Entry fee \$250.00
(9 v 9)	Under 11	born on/after Jan 1 2006	Entry fee \$250.00
	Under 12	born on/after Jan 1 2005	Entry fee \$250.00

Each team will be scheduled to play two (2) games. All Festival participants will receive participant mementos.

**All Star Teams**

**GIRLS/BOYS**

(11 v 11)	Under 13	born on/after Jan 1 2004	}	Entry Fee \$350.00
(Full Field)	Under 14	born on/after Jan 1 2003	}	Entry Fee \$350.00
	Under 16	born on/after Jan 1 2001	}	Entry Fee \$350.00
	Under 18	born on/after Jan 1 1999	}	Entry Fee \$350.00

Each team will be scheduled to play a minimum of three (3) games. Trophies will be awarded to each age Division Champions and Finalists. All participants will receive a Tournament souvenir.

All players must be registered with their respective Clubs and Provincial Association. Teams must provide an Albert Campbell Team Roster, showing Player's Name, OSA Number and Date of Birth.

**Teams travelling outside their district require travel permits.**

**As per OSA/SSA rules all players require OSA Player Books. (For ages U13 and up).**

Complete the Entry Form attached for each team entered and forward it by **August 28<sup>th</sup>, 2017** together with the appropriate entry fee to:

Scarborough Soccer Association  
45 Fairfax Crescent  
Scarborough, ON.  
M1L 1Z6

Tel: (416) 285-8002 Ext 27  
Fax: (416) 759-9875  
[ssa22@rogers.com](mailto:ssa22@rogers.com)  
[www.ssasoccer.net](http://www.ssasoccer.net)

(No Team will be accepted without payment)

***We look forward to your participation in the tournament***

**THIS TOURNAMENT IS APPROVED BY THE ONTARIO SOCCER ASSOCIATION**

# ALBERT CAMPBELL ALL STAR TOURNAMENT

## SEPTEMBER 23<sup>rd</sup> & 24<sup>th</sup> 2017

- FESTIVAL**
- ALL STAR**

### CLUB INFORMATION

### ENTRY FORM

Please Photocopy as necessary

CLUB NAME _____
TEAM NAME _____
CONTACT NAME _____
DISTRICT AFFILIATION _____

### TEAM INFORMATION

<b>SEND INFO TO:</b>	<b>COACH ( )</b>	<b>MANAGER ( )</b>
COACH _____	MANAGER _____	MANAGER _____
ADDRESS _____	ADDRESS _____	ADDRESS _____
CITY _____	CITY _____	CITY _____
PROV. _____	POSTAL CODE _____	PROV. _____
POSTAL CODE _____	POSTAL CODE _____	POSTAL CODE _____
HOME # (____) _____	HOME # (____) _____	HOME # (____) _____
BUSINESS # (____) _____	BUSINESS# (____) _____	BUSINESS# (____) _____
EMAIL _____	EMAIL _____	EMAIL _____

### TEAM ENTRY

**DEADLINE August 28<sup>th</sup>, 2017**

MINI SOCCER (Festival) (5v5 & 7v7 & 9v9)				FULL FIELD (11v11)			
GIRLS	Born	BOYS	Born	GIRLS	Born	BOYS	Born
U8 <input type="checkbox"/>	2009	U8 <input type="checkbox"/>	2009	U13 <input type="checkbox"/>	2004	U13 <input type="checkbox"/>	2004
U9 <input type="checkbox"/>	2008	U9 <input type="checkbox"/>	2008	U14 <input type="checkbox"/>	2003	U14 <input type="checkbox"/>	2003
U10 <input type="checkbox"/>	2007	U10 <input type="checkbox"/>	2007	U16 <input type="checkbox"/>	2001	U16 <input type="checkbox"/>	2001
U11 <input type="checkbox"/>	2006	U11 <input type="checkbox"/>	2006	U18 <input type="checkbox"/>	1999	U18 <input type="checkbox"/>	1999
U12 <input type="checkbox"/>	2005	U12 <input type="checkbox"/>	2005				

**PLEASE MARK THE APPROPRIATE BOX ABOVE**

TEAM COLOURS

ALTERNATE COLOURS

SHIRTS \_\_\_\_\_

SHIRTS \_\_\_\_\_

SHORTS \_\_\_\_\_

SHORTS \_\_\_\_\_

The S.S.A. reserves the right to cancel the tournament in the event of inclement weather, for the safety of the players.

**RETURN COMPLETED FORMS TO:**

**TEL: 416-285-8002 Ext. 27**

**FAX: 416-759-9875**

**ALBERT CAMPBELL TOURNAMENT**

45 Fairfax Crescent  
Scarborough, Ontario. M1L 1Z6  
Make cheques payable to: S.S.A.  
(Albert Campbell Tournament)