

California Kickoff Appeals Form

This appeal will also be applied to Power League Qualifier. Teams who believe that they are significantly miss-seeded must submit this written appeal by: **5:00 PM on Friday, December 16, 2016.**

Date: _____

Appeal submitted by: _____ Phone #: _____

Team: _____ Email: _____

By filling out this form, you believe that your team's seed is incorrect by at least 35% of the division's seedings. This percentage translates to these approximations:

Age Divisions Seeds Represented by 35%

| | |
|----|----|
| 12 | 8 |
| 13 | 19 |
| 14 | 31 |
| 15 | 30 |
| 16 | 41 |
| 17 | 19 |
| 18 | 23 |

Please answer the following questions:

1. What criteria are you using to show why your team is significantly mis-seeded? Please be specific.
2. Did your team play in a higher age division than their "actual" age level of play is? Example: Your team was mostly High School Juniors (17 yrs. Old) and was playing as an 18-1 team. Please provide documentation.
3. Is your club a "brand new" club? Is your team comprised of players from a power league team last season from a different club? Please provide documentation.
4. Did your club have a name change from last season? What percentage of players are returning from the previous season?
5. How did you finish in last season's Power/Premier League? Points: _____

Please fax this appeal form to 415-550-7762 or email this form to yball@ncva.com.

Your appeal will only be considered provided that you submit this form and any additional material needed by the deadline listed above.