



State ODP Tryouts Sunday, September 13

ODP Tryout Instructions and Reminders

Welcome to month #3 (September 13) of State ODP Tryouts.

You are receiving this email because you have registered a player (or players) for 2026 State ODP Tryouts. If you registered multiple players using the same email address, you may only receive this email one time. If you are properly registered and paid, then you would have received a confirmation from TeamSnap. Please make sure you check your junk/spam folders if you feel you are missing your confirmation.

This will offer a few reminders for those who attended in July/August and go over the protocols for those attending their first tryout.

Important: ODP Player's age/team

An ODP player's age grouping have NOT changed. While the clubs have returned to a "School year" age designation for players, ODP has NOT. ODP has always been, and will continue to be "Calendar Year". (January 1-December 31) A players' Team and age group will be based on their birth year. If your son was born in 2013, their team will be called and recognized as the 2013 Boys. Please make sure you are not sending your player to the incorrect field for tryouts!!! ODP players will not be playing up, or playing down during the tryout process. All players will participate in their birth year age group.

ODP Tryout Schedule and Location: Reminder

Please remember, it is not mandatory to attend all sessions, however you must attend at least one to be selected.

Location: Mistlin Sports Complex | 1201 River Rd. Ripon, 95366

Schedule:

Sunday, August 16 and September 13 *(Players can attend both or either session-No reservations required)*

ODP Boys: 9:00-10:30 and 1:00-2:30

ODP Girls: 11:00-12:30 and 3:00-4:30

If you know you will be absent: [2026-2027 ODP Tryout Absent Form](#) (This form is for ODP Only)

ODP Goal Keepers: (North of Field #6- GOAL KEEPER ZONE)

ODP Goal keepers will check in the same as all other players of their gender and age. They will submit their medical release and then will report to the assigned field at the assigned time for Goalkeeping (please see below). This information will also be posted at Headquarters. Goalkeepers will be expected to attend the morning Goalkeeping sessions (as posted below) **AND** the field Sessions for their age/gender. *(Ex: a 10B, 11B and 12B GK will report directly to the GK area at 9:00 am and stay until 9:45am. At 9:45am they will then report to the field where her age group is conducting tryouts. At 9:45 am the 13B, 14B and 15B will report to the GK Zone from the field they were at with the field players).*

Goalkeepers will attend the afternoon sessions with their age/gender groups (with field players), make sure you know the assigned field for your age/gender when you check in.

Keepers can only attend their assigned age group/gender time.

Goal Keeping Schedule:

Time	Gender	Birth Years	Session Type	Where to Report
9:00 – 9:45 AM	Boys	2010	GK Evaluations	GK Zone
9:00 – 9:45 AM	Boys	2011 & 2012	GK Evaluations	GK Zone
9:45 – 10:30 AM	Boys	2013	GK Evaluations	GK Zone
9:45 – 10:30 AM	Boys	2014 & 2015	GK Evaluations	GK Zone
11:00 – 11:45 AM	Girls	2010	GK Evaluations	GK Zone
11:00 – 11:45 AM	Girls	2011 & 2012	GK Evaluations	GK Zone
11:45 – 12:30 PM	Girls	2013	GK Evaluations	GK Zone
11:45 – 12:30 PM	Girls	2014 & 2015	GK Evaluations	GK Zone

Field Assignments: (What Gender/Age will be on what fields)

2015 Boys: Fields 1 & 2 | Meet between fields 1 & 2

2014 Boys: Fields 4 & 5 | Meet between fields 4 & 5

2013 Boys: Fields 6 & 7 | Meet between fields 6 & 7

2012 Boys: Fields 11 & 12 | Meet between fields 11 & 12

2011 Boys: Fields 9 & 10 | Meet between fields 9 & 10

2010 Boys: Fields 8 | Meet at field 8

2015 Girls: Fields 1 & 2 | Meet between fields 1 & 2

2014 Girls: Fields 4 & 5 | Meet between fields 4 & 5

2013 Girls: Fields 6 & 7 | Meet between fields 6 & 7

2012 Girls: Fields 11 & 12 | Meet between fields 11 & 12

2011 Girls: Fields 9 & 10 | Meet between fields 9 & 10

2010 Girls: Fields 8 | Meet at field 8

Goal Keeping Zone: Adjacent to Field 6

TO PLAYERS THAT ATTENDED IN JULY and or AUGUST:

You do not check in at the desk if you came in JULY and/or August and have your numbered jersey. Please report to the field site posted about 10 minutes prior to your session, be warmed up and ready to go. **Please bring BOTH your Gray and Blue Tryout jersey with you**, the coach will tell you when you arrive which color to put on. Always, bring your ball, water bottle and shin guards as well.

TO PLAYERS CHECKING IN FOR THE FIRST TIME: (Did not attend in July or August)

New players should go directly to the Check-in desk.

Player Check-In: (One time ONLY.)

New Players will check in at Mistlin Sports Park at "HQ" (Parking lot level) near Field 8.

Check -In is Open (1) hr. prior to each session

All players that did not attend in July or August need to check-in at the event desk to get their tryout Jerseys. You only need to do this ONE time, because we EXPECT you to keep your Jersey's and use them at all the dates you attend and events. DO NOT lose your shirts, they are your assigned number and cannot be replaced. Goal Keepers should refer to the Goalkeeper information posted above.

Medical Release: (Required)

Please remember your Medical Release, all Players checking in (first time only) are required to provide this in order to participate. Once you turn this in and get your tryout Jerseys, you will be all set for the remainder of the dates. If you need to print and complete a new Medical Release, here is the link:

[Medical Release Form](#)

Player Recommendations:

We will reach out to you if we do not have your recommendation. Please do not email us for a confirmation, we simply do not have the manpower to answer all those inquiries. I have reached out to a few players already and we will continue to do so. The link is: [2026-2027 ODP Try-Out Recommendation Form](#)

Players born in 2010 and 2011 are exempt from the recommendation process, as are those who were on the 2025/2026 State ODP/YOP Pools.

TO ALL PLAYERS:

What to bring to Tryouts: All players will need to bring their own ball, large water bottle and wear shin guards, cleats AND BRING BOTH JERSEYS (players who attended in July and or August).

Team Assignment in TeamSnap: I have had a number of inquiries from parents asking about a "team assignment" in TeamSnap after the player is registered. Players will not be assigned to a specific team in TeamSnap until after the tryouts are concluded and the pools are named. (Mid-September)

Absences: We have added a link for those of you to report your absence for Sunday, September 13th. This is not required but appreciated, as the staff who would like to know "who" is missing from their sessions. Here is the link: [2026-2027 ODP Tryout Absent Form](#)

The first part of the tryout process is being a "prepared" player. This is up to you, not your parents. Do you have your Water bottle? (you need to bring this to the field NOT have it delivered by a parent or sibling!) Do you have both Jerseys? Shin guards? Ball?

VERY IMPORTANT:

Field/Area Restrictions: In order to make this process smoother, there are areas we ask that parents/spectators/siblings avoid during the tryout period, please respect the restrictions. I have also included the Field Map so you can review the areas parents must avoid. [Field Map](#)

- **Check in Desk** - Player's all know their own names and birthday. Please make sure they have their completed medical form. **Player's only in the Check in area. This will be clearly defined and meant for all.**
- **LOWER FIELDS: (#1-8) - Anywhere in the "bowl" area of fields 1-8.** Parents should camp at the parking lot level only. Those choosing to sit in the areas between the Softball quad and fields are asked to respect the "Touch line" that will be placed there. We will be asking parents who choose to sit in this area to move up higher if they inch their way into the bowl. **Seeking shade is not an excuse for being in the restricted area.**
- **UPPER FIELDS: (#9-12)- Parents should stay in the parking areas (Lot or Dirt), not on the grass, or sidewalks.**
- **Behind any/all Goal areas** (please DO NOT put chairs on the sidewalks near the end of fields 9-12. Please do not camp behind any of the goal areas. Parents hanging around the goals areas will be asked to move. This means the entire length of the field where the goals are placed.

The most stressful part of the day is the staff having to manage the “Restricted areas”! When you think no one is there to manage the spectators, that is when I get calls from the Head Coaches to please come deal with problems. Let’s all please follow the policies so we can use all our manpower to make the day the very best it can be for the players’. We very much appreciate the respect.

Tryout uniform:

Your tryout uniform (Jersey’s) will be issued to you at Check-In. Your tops will reflect the number you are assigned at check in, and will be the method we use to identify players during the tryout process. DO NOT LOSE, GIVE AWAY OR MISPLACE YOUR SHIRTS. YOU WILL NEED THESE FOR ALL TRYOUTS, FOR ALL TRAINING SESSIONS AND FOR TRAVEL IF YOU ARE INVITED TO THE POOL. **We cannot** replace the shirts if lost or missing. (If lost you would have to purchase a new set with a New Number, and this can be problematic during the tryout process). Your first test is to keep track of your (2) Jerseys’!!! And bring them (both) to all try-outs. Black shorts are preferred but not required. White socks are preferred, but not required.

If we failed to answered any of your questions, please do not call, but email: ODP@calnorth.org

See you on Sunday, September 13th

Do not forget your water bottle and Soccer Ball!!!

Thank you,
Joyce Bordley
Director, Cal North ODP

Urgent or Emergency Notifications:

Please watch the Cal North Website, your email or my Out of Office for updates concerning Urgent or Emergency Notifications regarding Weather, Air Quality Index (related to fires and heat) etc.

Restricted Area



11



12

P
A
R
K
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N
G

Restricted Area



9



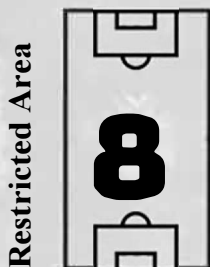
10

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ADDITIONAL
PARKING

Restricted Area

Restricted Area



8

Restricted Area

PARKING

HQ

Restricted Area



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7

Restricted Area



5



4

Restricted Area

PARKING

PARKING

PARKING

PARKING

Restricted Area



3



2



1

Restricted Area

Restricted Area

Restricted Area



MISTLIN
SPORTS COMPLEX

1201 RIVER ROAD, RIPON, CA 95366

River Rd



California Youth Soccer Association, Inc. Membership Form / Forma de Membresía

20 26 / 20 27 Season / Temporada

STATE ODP TRY-OUTS

OFFICE USE

PLAYER INFORMATION / FORMACION DEL JUGADOR

Legal First Name* / Nombre (legal)	Middle Initial / Inicial	Legal Last Name* / Apellido	Suffix (e.g. Jr.)	Gender* / Género
Birth Date/ Fecha de nacimiento # Prev Seasons / Temporada Anterior Grade / Grado School Name (during season of play) / Nombre de Escuela (durante la temporada)				
List any medical conditions that player has that could affect participation / Listar condiciones médicas del jugador que le pueden afectar en la competencia				

GUARDIAN INFORMATION / FORMACION

☐ Check here if your contact info has changed. / Haga clic aquí si su información de contacto ha cambiado

Legal First Name / Nombre (legal)	Legal Last Name / Apellido
MI / Gender* / Inicial Género	Relation / Parentesco Email
Address / Dirección	
City / Ciudad	State / Estado Zip / Area postal
Mobile Phone / Cell	Home Phone / Tel. de Casa

PARENTAL/VOLUNTEER SUPPORT / APOYO DE LOS PADRES

☐ Coach ☐ Manager ☐ Referee ☐ Board ☐ Fields ☐ Concessions ☐ Publicity ☐ Fundraising

Other:

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Other:

MEDICAL AND LIABILITY RELEASE / IMPORTANCIA MEDICA Y LIBERACION DE OBLIGACIONES – DEBE DE SER FIRMADO

I, the parent/legal guardian of the above-named player, a minor, or a player age 18 or over, agree that I and the player will abide by the rules and regulations of the U.S. Youth Soccer (USYS), and its affiliated organizations, and the California Youth Soccer Association, Inc (CYSA), and its affiliated organizations. I, for myself and the player and our respective heirs, administrators and successors, intending to be legally bound, hereby release and indemnify the USYS and CYSA Parties, the owners and operators of the facilities used for the programs, and their respective directors, officers, employees, agents and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with the player's participation in the Programs including, without limitation, player's transportation to/from any Program, which transportation is hereby authorized. I further grant the USYS and CYSA Parties the right to use player's name, picture and/or likeness in printed, broadcast and other material concerning the Programs provided such use is related to the player's status as a participant in the Programs.

As the parent/legal guardian of the above-named player, or player age 18 or over, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of me or my dependent.

I understand that if this player has been registered and rostered on a team with any CYSA league at any time during this seasonal year that unless he/she transfers off that team, this player may not be rostered on any other CYSA team. Being concurrently rostered on two different CYSA teams and/or providing false or misleading information may be cause for the player and/or team to be disqualified from any and all CYSA games in which the player participated and the player and/or team may face additional disciplinary action(s).

Yo, el padre/guardian legal del jugador antes mencionado, un menor de edad o un jugador edad de 18 años, estamos de acuerdo en obedecer las reglas y regulaciones de la U.S. Youth Soccer (USYS) y sus organizaciones afiliadas; la California Youth Soccer Association INC. (Cal North) y sus organizaciones afiliadas. Yo mismo(a), el jugador y respectivos herederos, administradores y asesores, que intentan estar ligados legalmente, por este medio le dan e indemnizan a las entidades USYS y Cal North, los dueños y operadores o las instalaciones que se usan para los programas y sus respectivos directores, oficiales, empleados, agentes y representantes de alguna demanda en contra de ellos, daños y causas de alguna acción surgida en conexión con la participación del jugador en los programas sin incluir ninguna limitación, la transportación del jugador hacia o desde cualquier programa, dicha transportación es por este medio autorizada. Yo, a continuación concedo a la USYS y Cal North los derechos para usar el nombre del jugador, fotos y/o similar a impreso, publicado y otro material sobre los programas proveídos que esté relacionado al estatus del jugador como participante en los programas.

Cómo el padre/guardian legal del jugador antes mencionado, o un jugador de edad de 18 años o más, yo por este medio doy mi consentimiento para obtener cuidado médico de emergencia proveído por un doctor en medicina o dentista. Este cuidado médico puede ser dado bajo las condiciones necesarias para preservar la vida, miembros o el bienestar mío y de mi dependientes.

Entiendo que si este jugador ha sido registrado y se le ha asignado equipo dentro de una liga de Cal North, en cualquier momento durante esta temporada y que solamente si el o ella solicitan su transferencia de su equipo, este jugador no podrá ser asignado a otro equipo dentro de Cal North. Si un jugador ha sido registrado y asignado a dos equipos diferentes de Cal North y/o si han dado información falsa, sería causa de que el jugador o equipo sea descalificado de toda competencia en la cual el jugador participó, además el jugador y equipo podrían enfrentar acciones disciplinarias adicionales. Además, reconozco que Cal North ha proporcionado una hoja informativa para padres y Hoja informativa para los atletas sobre concusiones que yo mismo he revisado con mi hijo.

LEAGUE/CLUB USE ONLY

NOT REQUIRED FOR ODP

Date Received _____

☐ Picture Received ☐ Birth Doc Received ☐ Birthdate Verified

Payment Received _____

Cash _____ Check _____

Scholarship _____



SIGNATURE OF PARENT/LEGAL GUARDIAN/ FIRMA: _____

DATE/FECHA: _____