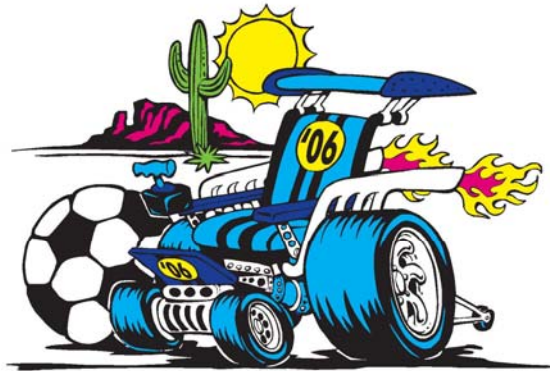


*POWER BLAST
MESA, ARIZONA*
POWER SOCCER



Arizona

Thursday, November 9 – Saturday, November 11, 2006

Hosted by

Mesa Association of Sports for the Disabled
Also doing business as



“Let no one sit on the sidelines”

Program Partners:
City of Mesa Parks and Recreation Division
Mesa Public Schools
Arizona State University



POWER SOCCER TOURNAMENT

- What:** 2006 Open Invitational Power Soccer Tournament
Part of the Arizona Desert Challenge Series of Competitions for athletes with physical disabilities
- Date:** Thursday, November 9th – Saturday, November 11th, 2006
- Location:** Tempe, Arizona, a suburb of Phoenix
- Facility:** Arizona State University Student Recreation Complex
500 East Apache Blvd; Tempe, AZ 85287
(Corner of Apache Blvd and Normal Avenue)
- Who:** Any athlete with a permanent physical disability involved in the sport of Power Soccer
- Registration:** Entry forms and fees are due no later than Monday, October 16th, 2006. A late fee of \$15.00 will be assessed for registrations postmarked after Monday, October 16th, 2006. Please send the completed forms to:
- Mesa Association of Sports for the Disabled
ATTN: 2006 *PowerBlast*
59 East Broadway Road
Mesa, AZ 85210
- Make checks payable to Mesa Association of Sports for the Disabled (MASD). We will not accept faxed registrations. We are unable to accept credit card.
- Fee:** \$30.00 per athlete / coach
Included in registration fee: Tournament play, Friday lunch, Saturday lunch, Saturday awards banquet, awards and games souvenir
- \$25.00 per athlete supporter
Included in registration fee: Access to the games, Friday lunch, Saturday lunch, Saturday awards banquet and games souvenir
- While they last, individual banquet tickets and souvenir item will be available at the tournament for an extra fee
- Check-in:** Thursday, November 9th, 2006
6:00 PM at the ASU Student Recreation Complex (address above)
- Events:** One on One Tournament on Thursday evening
Power Soccer Division I Competition on Friday and Saturday
Power Soccer Division II Competition on Friday and Saturday
Awards, dinner and dancing on Saturday evening
- Brackets:** To be determined based on teams registered
- Awards:** The top three teams in each division will be awarded a team trophy. Also, plaques will be awarded to the most outstanding player and the best sportsmanship portrayed by an athlete in each division.
- Banquet:** Saturday, November 11th, 2006 at 6:30 pm
The banquet facility is the Arizona Wing of the Commemorative Air Force located at 2017 N. Greenfield Rd. in Mesa, Arizona. The Commemorative Air Force Museum is approximately 8 miles from the host hotel. A guided tour of the museum will be available free of charge prior to dinner for those that are interested. www.arizonawingcaf.com

Transportation: It is recommended that each team, each individual athlete and/or family be responsible for their own ground transportation. The host organization will be offering accessible transportation for Thursday and Sunday airport travel and banquet shuttle to and from venue site for a **fee of \$125.00 per Team per Division.** The host organization is limited in the amount of available transportation; therefore, the provided service is a first-come-first-serve basis. **Contact Lane Jeppesen at 480-835-6273 to make your team's reservation for host organization transport.** All tournament locations including host hotel, gymnasium and local restaurants are within walking distance with the exception of the banquet facility which is approximately 8 miles from host hotel. The facilities being used for the tournament are approximately 7 miles East of Sky Harbor Airport. The Greater Phoenix area is served by all major car rental agencies. Other options include the following:

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|----------------------------------|--|
| Wheelchair Getaways | 602-494-8257 or 888-824-7413 \$95.00 /day plus \$60.00 drop-off/pick-up fee www.wheelchairgetaways.com |
| A-1 Rent-A-Car | 800-899-4320 \$109.95/day (Free driver pick-up at the airport) www.A1Leasing.com |
| Wheeler's Accessible Van Rentals | 800-456-1371 \$100/day plus tax and \$25 delivery/pick up from airport www.wheelersvanrentals.com |
| AVA Wheelchair Van Rentals | 866-333-1594 \$95/day www.wheelchairvanrental.com |

Lodging: Lodging arrangements are the responsibility of each team or individual athlete and family. When reserving rooms at the host hotel, please mention "Power Soccer Tournament" for the group discounted rate. Also, for the most appropriate room assignment, discuss your accessibility needs with the manager of the hotel.

Host Hotel:
Twin Palms Hotel
\$75.00/night – Group Rate
225 East Apache Boulevard
Tempe, AZ 85281
Toll Free: 800-367-0835
Direct: 480-967-9431
www.twinpalmsotel.com

Amenities Include:
7 accessible rooms
139 total rooms/7 floors
Beautiful view of Valley
Heated outdoor pool
"On the Rocks" Lounge
IHOP Restaurant
Less than .5 mile from venue

Additional Accommodations:

Days Inn Tempe-ASU
\$69.99/night plus tax
1221 East Apache Blvd.
Tempe, AZ 85281
480-968-7793
.6 mile from venue

Super 8 Motel-Tempe
\$79/night plus tax
1020 East Apache Blvd.
Tempe, AZ 85281
480-967-8891
.4 mile from venue

Further resources on the tournament, the Mesa Association of Sports for the Disabled, the program partners or the state of Arizona, please visit:

Mesa Association of Sports for the Disabled: www.mesadisabledsports.com

City of Mesa: www.cityofmesa.com

Tempe Convention and Visitors Bureau www.tempecvb.com

Mesa Public Schools: www.mpsaz.org

Arizona State University: www.asu.edu

Contacts:

Susan Byrne Rossi
Co-Games Director
(480) 644-5702
susan.byrne@cityofmesa.org

Lane Jeppesen
Co-Games Director
(480) 835-6273
lane@mesadisabledsports.com



**2006 PowerBlast
Power Soccer Tournament
Registration / Athlete Information Form**

Mail Registration Packet to:

**M.A.S.D.
2006 PowerBlast
P.O. Box 4727
Mesa, AZ 85211-4727**

Please complete one form for every Athlete, Coach, Support Staff or Family member.
Registration Fee: \$30.00 / athlete or coach \$25.00 / supporter
Late Fee: \$15.00 (Postmarked after Monday, October 16th, 2006)
Makes checks payable to Mesa Association of Sports for the Disabled or MASD.

Circle one of the following:

Athlete Coach Support Staff Parent Volunteer

Registrant Name _____ Date of Birth _____

Address _____ Gender: Male Female

City _____ State _____ Zip Code _____

Daytime Phone _____ Evening / Cell Phone _____

E-mail Address _____ Disability _____

Special Accommodations (e.g. food allergies) _____

DSO Membership Number _____ (provide copy of member card)

Team Name _____ Coach's Name _____

Coach's Daytime Phone _____ Coach's Cell Phone _____

Division _____

Are you a United States Veteran? _____ What division of the military? _____

We would like to honor all of the U.S. Veterans at the Awards Banquet in honor of Veterans' Day on Saturday, November 11th, 2006.

Mesa Association of Sports for the Disabled Insurance Waiver and Release of Liability

In consideration of being allowed to participate in any way in Mesa Association of Sports for the Disabled programs, related events, and activities, as well as those of any affiliated organizations, including Wheelchair Sports, USA; Disabled Sports, USA; National Disabled Sports Alliance; United States Association of Blind Athletes; United States Les Autres Sports Association; Arizona Special Olympics and others, I and/or the minor participant, the undersigned:

1. Agree that prior to participating, I will inspect, or if a parent and/or legal guardian, I will instruct the minor participant to inspect the facilities and equipment to be used, and if I believe anything is unsafe, I and/or the minor participant will immediately advise the Mesa Association of Sports for the Disabled of such conditions and refuse to participate.
2. Acknowledge and fully understand that I and/or the minor participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result only from my own actions, inactions, negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time.
3. Accept all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue the **Mesa Association of Sports for the Disabled**, it's affiliated organizations, their representative administrators, directors, agents, coaches, and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and leasers of premises used to conduct the events, all of which are hereinafter referred to as "releases", from demands, losses or damages on account of injury, including death or damage to property, cause or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
5. Agree to abstain from the use of alcohol and/or illegal drugs while participating in any event sponsored by the **Mesa Association of Sports for the Disabled** or it's affiliated organizations. Failure to adhere to this requirement will result in immediate removal and possible suspension.
6. Do hereby authorize, consent to and direct the **Mesa Association of Sports for the Disabled** to obtain a physician to render medical aid, perform operations and/or give treatment to me, in the case of an emergency, and do hereby consent to and authorize said physician to render any and all treatment that in his/her judgment may be necessary or advisable.
7. Understand that my participation or attendance at any **Mesa Association of Sports for the Disabled** activities or events constitutes permission to be photographed, videotaped or recorded for possible publicity or media purposes and constitutes a waiver of any and all claims for compensation from all sponsoring agencies.

I/we have read the above waiver and release and understand that I/we have given up substantial rights by signing this document and sign it voluntarily.

| | | |
|---|----------------------|------|
| Participant's Signature | Participant's Name | Date |
| If the participant is a minor and/or has a legal guardian: | | |
| Parent/Guardian Signature | Parent/Guardian Name | Date |