

TRINITY CUP

14 & UNDER DIVISION

COTECC Junior Circuit

FACT SHEET

2023



Page 1(2)

TOURNAMENT NAME AND DATES

Tournament	Name of Tournament Trinity Cup		City & Country Trinidad	Grade 1
Dates	Date of Monday in Tournament Week 10/04/2023	First day of Round Robin 8/04/2023	First day of Main Draw & Consolation Draw 10/04/2023	Last day of Tournament 13/04/2023

ORGANISER DETAILS

Entry Deadline	Entry Deadline (Date) March 20th, 2023			
Entry Organiser	Name of Organiser Tennis Association of Trinidad and Tobago		Street/PO Box address	Post code
	City, Country Tacarigua			
	Country code 1	Area code 868	Number 702-7537	
	Email address cotecccjuniorU14@hotmail.com			
Eligibility	The minimum age required to participate in the U14 COTECC Circuit tournaments is to be 11 years old <u>on the day that the U14 tournament begins</u> . And the maximum age is to turn 14 during the year of competition. <u>Born between January 1, 2009 and December 31, 2012.</u>			

VENUE

Venue	Name of Club/Venue The National Racquet Sports Centre		Contact person Jermille Danclar	
Address	LP#8 Orange Grove Road, Tacarigua			
Surface, Balls	Indoors/Outdoors Indoors	Type of surface Hard	Number of courts 4	Brand of Balls Wilson
	Country code 1	Area code 868	Number 702-7537	Email-address tennist2.tatt@gmail.com
Telephone, Email				
Fax	Na	Information to be found on tournament web-site:		
Internet address	www.tennistt.info		<input checked="" type="checkbox"/> Acceptance lists	<input checked="" type="checkbox"/> Draws
	<input checked="" type="checkbox"/> Order of Play			

TOURNAMENT DIRECTOR & REFEREE

Tournament Director	Name of Tournament Director Keshan Moonasar			Post Address The National Racquet Sport Centre	
	Country code 868	Area code 329	Number 7839	Email-address keshan1@live.com	
Fax					
Referee	Name of Referee Lamech Kevin Clarke			Country TTO	ITF Certification White Badge
	Country code 868	Area code 759	Number 5010	Email-address lamech_74@hotmail.com	
Mobile phone / Email					

DRAWS AND SIGN-IN DETAILS

Under 14		Draw size	Sign-in deadline	Start day	Prel. finish day	Entry Fee
Boys & Girls	Round Robin phase	32	Friday, April 7th at 6:00 p.m.	8/04/2023	9/04/2023	US50
	Dobles main Draw	16	Sunday, April 9th at 12:00 p.m.	10/04/2023	13/04/2023	
To participate in this age division players must be born between January 1st 2009 and December 31 2012						

HOTELS

Rates indicated are for persons not getting free hospitality

Official Hotel 1	Name of Hotel Holiday Inn Express			Street Address 1 Exposition Drive, Trincity			
Fax	Country code	Area code	Number	Email-address jlobin@hiextt.com			
Reserve through	868	669	6209				
	Country code	Area code	Number	Room Rates	Single Room 159/room, Use Code ITT	Double Room / pp 159/roon Code ITT	Triple Room / pp
Official Hotel 2	Contact person for reservations			Direct telephone number			
Telephone / Email	Jacqueline Lobin			868 669-6209			
	Monte Cristo Inn			Ramcharan Drive, Factory Road, Piarco			
Fax	Country code	Area code	Number	Room Rates	Single Room 100/pp/night Breakfast & Taxes Inc	Double Room / pp 65/pp/night Breakfast & taxes inc	Triple Room / pp
868	702	7537					
Reserve through	Contact person for reservations Tennis Association of Trinidad & Tobago			Direct telephone number (868) 702-7537			

HOSPITALITY

Players hospitality	<input type="checkbox"/> Full hospitality for Main Draw players only <input type="checkbox"/> Full hospitality for Main Draw players only until elimination <input type="checkbox"/> Full hospitality for Main Draw players until last member of team is eliminated <input type="checkbox"/> Other. Please detail below	
Coaches hospitality	No. of coaches	Level of hospitality None
Hospitality details	None	

TRAVEL AND VISA INFORMATION

International Airport	Name of Airport Piarco	Distance 7.4 KM	Transportation from Airport/Station to Club/Hotel
Domestic Airport			
Rail			
	*		
Visa requirements	If you require an invitation to obtain a visa, please contact		
Visa Invitations	Jermille Danclar	jermille@hotmail.com	

OTHER INFORMATION

Shuttle services from hotel to match venue and back to the hotel available
(see tournament website www.tennistt.info for shuttle schedule)

Stringing: USD 12

Laundry services available @ USD 20 per load

Taxi services available between hotel and venue

PLAYERS ARE RESPONSIBLE FOR MAKING THEIR OWN HOTEL RESERVATIONS, BOTH HOTEL AND FLIGHTS SHOULD BE MADE AS SOON AS POSSIBLE



ENTRY INFORMATION

TOURNAMENT TITLE TRINITY CUP	City Tacarigua	Country Trinidad
Tournament Dates April 8th - 13th	Entry Deadline March 20th, 2023	Withdrawal Deadline April 3rd, 2023
ELIGIBILIDAD / ELIGIBILITY To participate in this age division players must be born between January 1st 2009 and December 31 2012 and be 11 years old on the day the tournament begins		
Entry Fax Number	Email address coteccjuniorU14@hotmail.com	

ENTRIES SANCTIONED BY

National Tennis Association	Contact person (name)	Position in National TA
Telephone	Fax	Email

OFFICIAL COACHES ASSIGNED BY NATIONAL ASSOCIATION

Name of Coach 1	Name of Coach 2
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BOYS 14 & UNDER - Entries in priority order -

#	Family Name	PLAYER First Name	Nationality 3-letter code	Date of Birth Date/Month/Year	National ranking 14 & Under
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

GIRLS 14 & UNDER - Entries in priority order -

#	Family Name	PLAYER First Name	Nationality 3-letter code	Date of Birth Date/Month/Year	IPIN	National ranking 14 & Under
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

DATE AND SIGNATURE

Sanction date	Signature
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WITHDRAWAL INFORMATION

TOURNAMENT TITLE TRINITY CUP	City Tacarigua	Country Trinidad
Tournament Dates April 8th - 13th	Entry Deadline March 20th, 2023	Withdrawal Deadline April 3rd, 2023
Post Address for entries		
Withdrawal Fax Number	Email address coteccjuniorU14@hotmail.com	

WITHDRAWALS MADE BY

National Tennis Association	Contact person (name)	Position in National TA
Telephone	Fax	Email

BOYS 14 & UNDER - Withdrawals

#	Family Name	PLAYER			Medical / / Other reason	Certificate Attached / / To follow
		First Name	Nationality <small>3-letter code</small>	Date of Birth <small>Date/Month/Year</small>		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

GIRLS 14 & UNDER - Withdrawals

#	Family Name	PLAYER			Medical / / Other reason	Certificate Attached / / To follow
		First Name	Nationality <small>3-letter code</small>	Date of Birth <small>Date/Month/Year</small>		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

DATE AND SIGNATURE

Date	Signature
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