#### **COTECC** Junior Circuit

**FACT SHEET** 

2025



## **14 & UNDER DIVISION**

**TRINITY CUP** 

TOURNAMENT NAME AND DATES							
	Name of Tournament			City & Country	/	Grade	
Tournament	Trinity Cup			Tacarigua, Trinidad		2	
Dates	Date of Monday in To 14/04/2025	urnament Week	First day of Round Robin 12/04/2025	First day of Ma 14/04/2025	ain Draw & Consolation	Last day of Tournament 17/04/2025	
		0	RGANIZER DETAIL	6			
	Entry Deadline (Date)		RGANIZER DETAIL	.5			
Entry Deadline March 25th at 14 hrs DOM time							
	Name of Organizer	_	Street/PO Box address		Post code	City, Country	
	Tennis Association of	Trinidad & Tobago	Orange Grove Road			Tacarigua	
Entry Organiser	Country code	Area code 868	Number 702-7537				
	Email address		•				
	coteccjuniorU14	<u> Dhotmail.com</u>					
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 tournament begins.</u> And the maximum age is to turn 14 during the year of competition. <u>Born between January 1, 2011 and December 31, 2014.</u>						
	Name of Club/Venue		VENUE	Contact perso	2		
Venue		acquet Sports Cent	rο	Jermille D			
Venue		acquer opons cent		Jerrinie D			
Address	•	irove Road, Tacario	gua				
o (	Indoors/Outdoors	Type of surface		Number of cou		Brand of Balls	
Surface, Balls	Indoors	Hard	Neurolean	4		e Championship	
Telephone, Email	Country code	Area code 868	Number 702-7537	Email-address	tt@gmail.com		
Telephone, Email	1	000	102-7537				
				Information to	be found on tournament wel	b-site:	
Internet address	www.tennistt.info	-		Acceptance	e lists 🛛 Drawws	Order of Play	
		TOURNAM	IENT DIRECTOR &	REFEREE			
	Name of Tournament			Address			
Tournament Director	urnament Director Jermille Danclar		The National Racquet Sports Centre				
	Country code	Area code	Number	Email-address			
Telephone / Email	1	868	471-9493	jermille@h	otmail.com		
Referee	Name of Referee	-		Country	ITF Certification		
Reieree	Edwin Chu For			тто	White Badge		
Mobile phone / Email	Country code 868	Area code 329	Number 6135	Email-address echufor@hotmail.com			
<b>-</b>			8				

DRAWS AND SIGN-IN DETAILS

Under 14		Draw size	Sign-in deadline			Start day	Prel. finish day	Entry Fee	
1	1			<u> </u>					LIIII YI CC
Boys &		d Robin phase	32	11/04/2025	from 4.00pr	m - 6.00pm	12/04/2025	13/04/2025	
Girls	Main I	Draw/Doubles	16	13/04/2025	@ 12.00 noo	'n	14/04/2025	17/04/2025	US\$50
		To participate	in this age division play	ers must be bor	n between Jan	uary 1st 2011 a	and December 31 2014		
				HOTE	ELS				
			Name of Hotel				Street Addr	ess	
Official	I Hotel 1	Holiday Inn Exp				#1 Explosion Drive, Trincity			
			Contact person/Email/	Phone		Hotel	Direct telephone number/En	mail	
Reserve	e through	Kristophe	r Thomas: kthomas	s@crewsinn.	com		1-868-669-	6209	
Room	n rates		Single Room	Double Room	Triple Room				
		Tax Inclusive	USD 177.87	USD 189.9	97				
			Name of Hotel		Street Address				
Official	I Hotel 2								
			Contact person/Email/Phone				Hotel Direct telephone	number/Email	
Reserve	e through								
Room	n rates		Single Room	Double Room	Triple Room				
		<u> </u>	TDAVEL			MATION			
Internatio	nal Airport	Name of Airport	IRAVEL	AND VIS	1		on from Airport/Station to	Chub/Hotol	
miernaus.		Piarco Internation	al Airport		3.6km		hotel is available		
			layer is responsible	of finding or					
			itation to obtain a visa, p		-				
	IFORMATI	ON							
Stringing: US12 Shuttle avaliable from official hotels to match venue and back to hotel Taxi services from venue to hotel also available Players are responsible for their own hotel bookings and flight arrangements.									

Opening Ceremony: Sunday 13th April 2025, 6:15pm

# **COTECC U14 CIRCUIT**

## ENTRY FORM



	ENTRY INFORMATION						
TOU	RNAMENT TITLE	City	-	Country			
Trir	nity Cup	Tacarigua		Trinidad			
Tour	nament Dates	Entry Deadline		Withdrawal Deadline	9		
Apr	il 12th-17th, 2025	March 25		April 1			
-	IBILIDAD / ELIGIBILITY						
Τοι	participate in this age division players must be born be	etween January 1st 2011 and E begins	December 31 20	14 and be 11 years	old on the day the	tournament	
	Enviar/Se	nd to: coteccjunioru1	4@hotmail.	com			
		BOYS 14 & UNDE	R				
		PLAYER				National	
	Family Name	First Name	Nationality	Date of Birth		ranking	
#			3-letter code	Date/Month/Year		14 & Under	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

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

DATE AND SIGNATURE				
Date	Signature			

COTECC U14 CIRCUIT

# WITHDRAWAL FORM



	WITHDRAWAL INFORMATION							
-	RNAMENT TITLE	City	Country					
	nity Cup	Tacarigua		Trinidad				
	nament Dates	Entry Deadline		Withdrawal Deadline				
Apr	il 12th-17th, 2025	March 25		April 1				
	Enviar/Send to: coteccjunioru14@hotmail.com							
	BO	YS 14 & UNDER - Wi	thdrawals	•				
		PLAYER			Medical /	Certificate		
	Family Name	First Name	Nationality	Date of Birth	/ Other	Attached /		
#			3-letter code	Date/Month/Year	reason	/ To follow		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

	GIRLS 14 & UNDER - Withdrawals						
		PLAYER			Medical /	Certificate	
	Family Name	First Name	Nationality	Date of Birth	/ Other	Attached /	
#			3-letter code	Date/Month/Year	reason	/ To follow	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
	DATE AND SIGNATURE						

DATE AND SIGNATURE						
	Date	Signature				