



US Youth Soccer
A Proud Member of US Soccer

Affiliated with the Federation International de Football Association



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games 2011 Collegiate Championship Soccer Festival Website URL: http://collegesoccerfestival.com/
 Hosting Organization Hoover Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Justin Sexton Title D.O.C. Phone (205) -9788663 W
 Address 1935 Hoover Court, Suite 215 Email jsexton@hooversoccerclub.com Phone () _____ H
 City Hoover State AL Zip Code 35226 Phone () _____ FAX
 State Association or Affiliate AYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Hoover, AL **TEAM ENTRY DEADLINE:** November 18, 2011
 Date(s) of Tournament or Games December 9-11 Estimated # of Teams 60
 Tournament or Games Director or Contact Person Justin Sexton Phone (205) -9788663 W
 Address 1935 Hoover Court, Suite 215 Email jsexton@hooversoccerclub.com Phone () _____ H
 City Hoover, AL 35226 State AL Zip Code 35226 Phone () _____ FAX

Age Groups Accepted	Type(s) of Team Accepted	B	G	Roster Size	# Guest Players Allowed	Length of Games	# Players on Field	Awards	Minimum # of Games	Entry Fee	Bond
U-9 8/1/03	Club, Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11	3	50	6	<input type="checkbox"/>	3	850	<input type="checkbox"/>
U-10 8/1/02	Club, Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11	3	50	6	<input type="checkbox"/>	3	850	<input type="checkbox"/>
U-11 8/1/1	Club, Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14	3	60	8	<input type="checkbox"/>	3	900	<input type="checkbox"/>
U-12 8/1/0	Club, Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14	3	60	8	<input type="checkbox"/>	3	900	<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>

*List of types of teams and tournaments is on reverse side of this form.

RT RESTRICTED TOURNAMENT - US Youth Soccer Members and Affiliates only.
 Team will be restricted to teams within the national state association Teams will be invited from all US Youth State Associations/Affiliates only.
 UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: US Club
 Foreign Teams as listed: _____

The Hosting Organization agrees to be bound by and comply with the terms contained in the TOURNAMENT AND GAMES HOSTING AGREEMENT and all applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization [Signature] Date 8/2/2011



APPROVAL
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE _____ Date SEP 08 2011
 By [Signature] Title _____

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.

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