



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 Salvation Army Christmas Angel Website URL: www.azsoccerevents.com

Hosting Organization AZ Premier SC Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Tom McConkey Title Tournament Director Phone (623) 6953025 W

Address 7599 N Central Ave Email tommccconkey@cox.net Phone (623) 6953025 H

City Phoenix State AZ Zip Code 85020 Phone (623) 5355630 FAX

State Association or Affiliate AYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Phoenix AZ **TEAM ENTRY DEADLINE:** 11/15/2010

Date(s) of Tournament or Games December 3, 4, 5, 2010 Estimated # of Teams 150

Tournament or Games Director or Contact Person Tom McConkey Phone (602) 6953025 W

Address 7599 N Central Ave Email tommccconkey@cox.net Phone (623) 6953025 H

City Phoenix State AZ Zip Code 85020 Phone (623) 5355630 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- 7 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	REG	7	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 8 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	REG	7	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 9 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	REG	8	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 10 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	REG	8	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 11 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	REG	81	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 12 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	REG	11	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 13 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	REG	11	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 14 8/1/	ALL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	REG	11	<input checked="" type="checkbox"/>	3	275	<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: AYSO, USCS
- 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 _____ Date _____

APPROVAL
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Mark Theide Date 7/27/10

By Mark Theide Title VP of Competition

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.