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11/24/2012

A Proud Member of US Soccer
C.D.Y.S.L.
19 Aviation Road
Suite 10
Albany, NY 12205-1142



Please Type or Print Clearly - Do Not Staple

Albany, NY 12205-1142

Amey Kibbawle

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games NYS Empire Cup Website URL: www.cdysl.org

Hosting Organization Capital District Youth Soccer League Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Kathy Marco Title Tournament Director Phone (518) 435-2325 W

Address 19 Aviation Rd Email cdyslevents@cdysl.org Phone () _____ H

City Albany State NY Zip Code 12205 Phone (518) 435-2328 FAX

State Association or Affiliate ENYSSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Albany, NY area TEAM ENTRY DEADLINE: May 15, 2013

Date(s) of Tournament or Games June 22 and 23, 2013 Estimated # of Teams 100

Tournament or Games Director or Contact Person Kathy Marco Phone (518) 435-2325 W

Address 19 Aviation Road Email cdyslevents@cdysl.org Phone () _____ H

City Albany State NY Zip Code 12205 Phone (518) 435-2328 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- 10 8/1/	S1-S4 (6V6)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	6	<input checked="" type="checkbox"/>	4	\$500	<input type="checkbox"/>
U- 11 8/1/	S1-S4 (8V8)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	16	<input checked="" type="checkbox"/>	4	\$600	<input type="checkbox"/>
U- 12 8/1/	S1-S4 (8V8)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	22	<input checked="" type="checkbox"/>	4	\$600	<input type="checkbox"/>
U- 13 8/1/	S1-S4 (11V11)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	22	<input checked="" type="checkbox"/>	4	\$650	<input type="checkbox"/>
U- 14 8/1/	S1-S4 (11V11)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	22	<input checked="" type="checkbox"/>	4	\$650	<input type="checkbox"/>
U- 15 8/1/	S1-S4 (11V11)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	22	<input checked="" type="checkbox"/>	4	\$650	<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input checked="" 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 -Open only to members of US Youth Soccer and its State Associations.
- Team will be restricted to teams within the 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, AYSO and Just Say
- International Teams as listed: Canadian Teams

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

Kathy Marco

Date October 22, 2012

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE



Date 11/26/2012

By Juanita M. Roth Title officer

Sent to USSF 11/24/2012