



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 MEMORIAL WEEKEND Website URL: www.brentwoodyouthsoccer.net
 Hosting Organization Brentwood Youth Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Violette Smith Title President Phone () _____ W
 Address P.O. Box 864 Email vsmith19@yahoo.com Phone () 631-398-2527 H
 City Brentwood State NY Zip Code 11717 Phone () _____ FAX
 State Association or Affiliate ENYSA LIJSL Guest Referee Applications Accepted Yes No
 Location of Tournament or Games Brentwood State Soccer Park **TEAM ENTRY DEADLINE:** 30 days prior
 Date(s) of Tournament or Games See Attached List 5/25-26, 2012 Estimated # of Teams 88
 Tournament or Games Director or Contact Person Herbert Lewis Phone () 631-748-9882 W
 Address 180 Brentwood Parkway Email herb.g.lewis@gmail.com Phone () 631-952-4795 H
 City Brentwood State NY Zip Code 11717 Phone () 631-952-2067 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/ 01	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 10 8/1/ 00	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 11 8/1/ 99	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 12 8/1/ 98	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 13 8/1/ 97	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 14 8/1/ 96	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 15 8/1/ 95	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 16 8/1/ 94	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 17 8/1/ 93	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 18 8/1/ 92	S3 & S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	50 MIN	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
U- 19 8/1/91	S3 & S4	X	X	16	2	50 MIN	11	X	3	550.00	<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/Affiliate only.
 UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: AYSO, US Club Soccer, Say Soccer
 Teams as listed: 4 League

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

[Handwritten Signature]

APPROVED
 LONG ISLAND JUNIOR
 SOCCER LEAGUE
 Date 12/10/12

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By *[Handwritten Signature]*

Date 12-14-2012
 Title Officer