



Please Type or Print Clearly - Do Not Staple

A Proud Member of US Soccer  
Affiliated with the Federation International de Football Association

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Albany, NY 12205-1142

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Highland Soccer Club Fall Classic Website URL: highlandsoccerclub.org

Hosting Organization Highland Soccer Club Type of Tournament:  Select  Recreational  Select & Rec

Designate Official of Hosting Organization Angelo Cremo Title Tournament Director Phone ( ) \_\_\_\_\_ W

Address 504 Sanders Ave Email littleang101@yahoo.com Phone 518-703-0875 H

City Scotia State NY Zip Code 12302 Phone ( ) \_\_\_\_\_ FAX

State Association or Affiliate ENYSSA Guest Referees Applications Accepted  Yes  No

Location of Tournament or Games Maalwyck Park **TEAM ENTRY DEADLINE:** 10/3/2014

Date(s) of Tournament or Games October 11 2014 Estimated # of Teams 20

Tournament or Games Director or Contact Person Angelo, Cremo Phone ( ) \_\_\_\_\_ W

Address 504 Sanders Ave Email littleang101@yahoo.com Phone 518-703-0857 H

City Scotia State NY Zip Code 12302 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-	8	8/11	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	4	<input checked="" type="checkbox"/>	3	325.00	<input type="checkbox"/>
U-	10	8/11	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	7	<input checked="" type="checkbox"/>	3	350.00	<input type="checkbox"/>
U-	12	8/11	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	25	8	<input checked="" type="checkbox"/>	3	350.00	<input type="checkbox"/>
U-	14	8/11	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	35	11	<input checked="" type="checkbox"/>	3	360.00	<input type="checkbox"/>
U-		8/11		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/11		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/11		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/11		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/11		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		8/11		<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

International 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 *Angelo R Cremo* Date 4/2/14

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By *[Signature]* Date 4/17/2014

Title *officer*

