



Kohl's American Cup Registration Form

Internal use only:

Date received: _____

Interactive _____

Non-Interactive _____

CONTACT INFORMATION:

State Association: ENYYSL

Contact Name/Title: Cathy O'Brien
Operations administrator

Work Number: (516) 766-0849 Email Address: cobrien@enysoccer.com

Tournament Host Association: Northern United Soccer Club

Contact Name/Title: Tim Streeeter – Co-President

Email Address: tstreeeter@kyleco.com Website: www.sgfsoccerclub.com

Shipping Address (No PO Boxes): 22 Hudson Falls road

City: South Glens Falls State: NY Zip Code: 12803

Is this address: Home Business

Business Name: Kyle Company

Work Number: 518.747.0522 Cell Number: 518.796.2159

TOURNAMENT INFORMATION: *List several available dates so we can do our best to accommodate your request.*

Preferred Tournament Date(s): October 26, 2013 Time(s): 9 a.m. – 3 pm

Alternate Tournament Date(s): N/A Time(s):

Is your tournament taking place on more than one weekend? Yes No

If yes, please list the additional dates

Number of complexes/venues being used: 1

Name of Complex (es): Golden Goal Soccer park

Address of Field (Main Location): 495 Goodman Road

City: Fort Ann State: NY Zip Code: 12827

Number of fields being used: 6

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Age groups accepted: Boys Girls Co-ed

<input type="checkbox"/> U-5	<input type="checkbox"/> U-6	<input checked="" type="checkbox"/> U-7	<input checked="" type="checkbox"/> U-8	<input checked="" type="checkbox"/> U-9	<input checked="" type="checkbox"/> U-10	<input checked="" type="checkbox"/> U-11
<input checked="" type="checkbox"/> U-12	<input type="checkbox"/> U-13	<input type="checkbox"/> U-14	<input type="checkbox"/> U-15	<input type="checkbox"/> U-16	<input type="checkbox"/> U-17	<input type="checkbox"/> U-18
<input type="checkbox"/> U-19						

Estimated # of Teams: 45 Estimated # of Players: 450

DAY OF EVENT CONTACT INFORMATION: *This information will be on the Media Advisory and Press Release.*

Contact Name: Tim Streeeter

Title: President

Phone Number: 518.743.9805 Email Address: tstreeeter@kyleco.com

MEDIA CONTACTS: *US Youth Soccer Communications will use a database to pull local contacts based on the impacted cities/suburbs. Often, local representatives are aware of additional key contacts. Please provide any members of the local working media that should be added to our communications. Format – John Doe, USA Today – jdoe@usatoday.com – 888-888-8888*

Newspaper:

Television:

Radio:

TOURNAMENT PROMOTION:

What methods will you use to drive awareness of the tournament?

<input checked="" type="checkbox"/> Website Exposure	<input checked="" type="checkbox"/> Organization Newsletter	<input type="checkbox"/> Radio or Television
<input type="checkbox"/> Direct Mail	<input type="checkbox"/> Print Media with advertising	<input checked="" type="checkbox"/> Flyers/Posters at other events
<input checked="" type="checkbox"/> Press Release	<input type="checkbox"/> Event Registration Forms	<input type="checkbox"/> Other: <input type="checkbox"/>

SPONSOR INFORMATION: **US Youth Soccer and Kohl's reserves the right to review all local sponsorships*

List potential local tournament sponsors and proposed event support: N/A

KOHL'S AMERICAN CUP SOCCER EXPERIENCE:

Would you like to have the Kohl's American Cup Soccer Experience (inflatables) Yes No at your event?

Do you have an area on-site that can accommodate the Kohl's American Cup Soccer Experience? Yes No

Are you able to provide volunteers to help the tour director with the interactive area for the duration of the

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tournament? 5 volunteers for 1 day, 10 volunteers for 2 days

Yes No

MISCELLANEOUS:

Has your organization hosted an American Cup before:

Yes No

If yes, please list the year and location of the event October 8, 2012

If yes, please list previous local tournament sponsors and support they provided at the event (i.e., T-Shirts, beverages) N/A

Are you interested in purchasing Kohl's American Cup T-Shirts for your event?

Yes No

Are you interested in learning more about Kohl's A-Team volunteer program?

Yes No

Do you use online registration for your Kohl's American Cup event?

Yes No

Do you have an event program for your Kohl's American Cup?

Yes No

By signing this registration form, you acknowledge the registered event is a Kohl's American Cup event.

Hilda Wolfe

Office

9/16/13

Signature of President or Executive Director of State Association

Date

Please return this form to:

Cody Houseknecht – Soccer Operations Programs Assistant – US Youth Soccer
(P) 972-334-9300 (F) 972-334-9960 chouseknecht@usyouthsoccer.org



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