

Please Type or Print Clearly - Do Not Staple

# BEXAR COUNTY GAMES BLACK & BLUE INVITATIONAL TOURNAMENT

## APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games: BLACK & BLUE WINTER ACADEMY TOURNAMENT Website URL: WWW.CLASSICSELITE.US

Hosting Organization: CLASSICS ELITE Type of Tournament:  Select  Recreational  Select & Rec

Designate Official of Hosting Organization: WALT TZULE Title: CE Boys Doc Phone (214) 843-2575 W

Address: 1400 E BITTUS RD Email: walter.tzule@classicseelite.com Phone ( ) ↓ H

City: SAN ANTONIO State: TX Zip Code: 78216 Phone ( ) ↓ FAX

State Association or Affiliate: STYSA Guest Referees Applications Accepted  Yes  No

Location of Tournament or Games: CE Dossom TEAM ENTRY DEADLINE: NOV 22, 2017

Date(s) of Tournament or Games: DECEMBER 1-3 Estimated # of Teams: 100

Tournament or Games Director or Contact Person: WALT TZULE Phone (214) 843-2575 W

Address: 1400 E BITTUS RD Email: walter.tzule@classicseelite.com Phone ( ) ↓ H

City: SAN ANTONIO State: TX Zip Code: 78216 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-7 8/11 11	RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	30	4	<input checked="" type="checkbox"/>	3	225	<input type="checkbox"/>
U-8 8/11 10	RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	30	4	<input checked="" type="checkbox"/>	3	225	<input type="checkbox"/>
U-9 8/11 09	RT <del>SS</del>	<input type="checkbox"/>	<input type="checkbox"/>	12	4	40	7	<input checked="" type="checkbox"/>	3	400	<input type="checkbox"/>
U-10 8/11 08	RT <del>SS</del>	<input type="checkbox"/>	<input type="checkbox"/>	12	4	40	7	<input checked="" type="checkbox"/>	3	400	<input type="checkbox"/>
U-11 8/11 07	S1, S2, S3, RT	<input type="checkbox"/>	<input type="checkbox"/>	16	5	50	9	<input checked="" type="checkbox"/>	3	475	<input type="checkbox"/>
U-12 8/11 06	S1, S2, S3, RT	<input type="checkbox"/>	<input type="checkbox"/>	16	5	50	9	<input checked="" type="checkbox"/>	3	475	<input type="checkbox"/>
U-13 8/11 05	"	<input type="checkbox"/>	<input type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U-14 8/11 04	"	<input type="checkbox"/>	<input type="checkbox"/>	18	5	60	11	<input type="checkbox"/>	3	550	<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: \_\_\_\_\_
- 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.

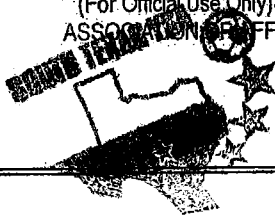
Signature of Designated Official of Hosting Organization

*[Handwritten Signature]*

Date 9/15/2017

**APPROVAL**

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE



By Jim Hal Date 10/8/17  
South Texas Youth Soccer Assoc. Title AAYSA Exec VP  
11.7.17  
 Executive