



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

**SPRING CLASSIC**  
 US YOUTH SOCCER

Please Type or Print Clearly - Do Not Staple

**APPLICATION TO HOST A TOURNAMENT OR GAMES**

Name of Tournament or Games CLASSICS ELITE SPRING CLASSIC Website URL: WWW.CLASSICS-ELITE.US  
 Hosting Organization CLASSICS ELITE Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization WALTER RULE Title TOURN. DIRECTOR Phone 210 843-2515 W  
 Address 1600 E BITTERS RD Email WALTER.RULE@CLASSICS-ELITE.COM Phone 210 843-2515 H  
 City SAN ANTONIO State TX Zip Code 78214 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate STYSA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games CE BLOSSOM **TEAM ENTRY DEADLINE:** APRIL 23, 2018  
 Date(s) of Tournament or Games MAY 5-6, 2018 Estimated # of Teams 90  
 Tournament or Games Director or Contact Person WALTER RULE Phone 210 843-2515 W  
 Address 1600 E BITTERS RD Email WALTER.RULE@CLASSICS-ELITE.COM Phone ( ) \_\_\_\_\_ H  
 City SAN ANTONIO State TX Zip Code 78214 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	4	40	4	<input type="checkbox"/>	3	325-	<input type="checkbox"/>
U-8 8/11	10 RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	4	40	4	<input type="checkbox"/>	3	325-	<input type="checkbox"/>
U-9 8/11	9 RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50	7	<input checked="" type="checkbox"/>	3	400-	<input type="checkbox"/>
U-10 8/11	8 RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50	7	<input checked="" type="checkbox"/>	3	400-	<input type="checkbox"/>
U-11 8/11	7 RT, S1-3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	4	60	9	<input checked="" type="checkbox"/>	3	475-	<input type="checkbox"/>
U-12 8/11	6 RT, S1-3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	60	9	<input checked="" type="checkbox"/>	3	475-	<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: \_\_\_\_\_
- 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

Date 3/12/18

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By

June Hop  
Executive

Title

SWATexas Youth Soccer Assoc  
 Date 4/4/18  
AYSA VP

