



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

TOURNAMENT

Name of Tournament or Games KLEIN THANKSGIVING Website URL: KLEINSOCCERCLUB.ORG

Hosting Organization TYSA Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization AHMED EDELSKARY Title PRESIDENT Phone () _____ W

Address _____ Email PRESIDENT@TIMBERLINE Phone () _____ H

City _____ State _____ Zip Code SOCCER.COM Phone () _____ FAX

State Association or Affiliate SOUTH TEXAS Guest Referees Applications Accepted Yes No

Location of Tournament or Games MEYER PARK TEAM ENTRY DEADLINE: 11-12-2017

Date(s) of Tournament or Games 11-25-2017 TO 11-26 2017 Estimated # of Teams 100

Tournament or Games Director or Contact Person TROY BROCKS Phone 281 615 8787

Address _____ Email _____ Phone () _____ H

City _____ State _____ Zip Code _____ 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-9	8/11	9		UT	<input type="checkbox"/>	<input type="checkbox"/>	12	3	20	7	<input type="checkbox"/>	3	450	<input type="checkbox"/>
U-10	8/11	8)	<input type="checkbox"/>	<input type="checkbox"/>	12		20	7	<input type="checkbox"/>)	450	<input type="checkbox"/>
U-11	8/11	7			<input type="checkbox"/>	<input type="checkbox"/>	14		25	9	<input type="checkbox"/>		500	<input type="checkbox"/>
U-12	8/11	6			<input type="checkbox"/>	<input type="checkbox"/>	14		25	9	<input type="checkbox"/>		500	<input type="checkbox"/>
U-13	8/11	5			<input type="checkbox"/>	<input type="checkbox"/>	18		30	11	<input type="checkbox"/>		550	<input type="checkbox"/>
U-14	8/11	4			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-15	8/11	3			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-16	8/11	2			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-17	8/11	1			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-18/19	8/11	1			<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 10/17/17

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

TYSA

Date 10/17/17

By Ahmed Edelskary

Title President

South Texas Youth Soccer Association 10-30-17

JSD

Exec Director

