



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

Name of Tournament or Games: MAJGIC 4v4 Tournament Website URL: www.stingaustin.com

Hosting Organization: Sting Soccer Club - Austin Division Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization: Angel Cuevas Title: Tournament Director Phone () 512-270-0086 W

Address: 12407 N Mopac Expressway, Suite 250-525 Email: an_cuevas14@yahoo.com Phone () _____ H

City: Austin State: TX Zip Code: 78758 Phone () _____ FAX

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

Location of Tournament or Games: Sting Austin North Soccer Park TEAM ENTRY DEADLINE: _____

Date(s) of Tournament or Games: August 5 2017 Estimated # of Teams: _____

Tournament or Games Director or Contact Person: Angel Cuevas Phone () 512-270-0086 W

Address: 700 Limmer Loop Email: an_cuevas14@yahoo.com Phone () _____ H

City: Hutto State: TX Zip Code: 78634 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- 5/6 8/11 12/11	REC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 7/8 8/11 10/09	REC & REC +	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 9/10 8/11 08/07	REC & REC +	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 11 8/11 2006	REC & SELECT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 12 8/11 2005	REC & SELECT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 13 8/11 2004	REC & SELECT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 14 8/11 2003	REC & SELECT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 15 8/11 2002	REC & SELECT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<input type="checkbox"/>
U- 16-18 8/11 01-99	REC & SELECT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	24 min.	4	<input type="checkbox"/>	3	\$190	<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 3/31/17

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

South Texas Youth Soccer Assoc

Date 4-27-17

By

Title Exec Director

