



US Youth Soccer

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 Calle Ocho Soccer Camaval Website URL: _____

Hosting Organization Soccer Marketing & Promotions Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Daniel Prenat Title Tournament Director Phone (305) 6690101 W

Address 7444 SW 48th St. Email Danny@copalatina.com Phone (786) 4871018 H

City Miami State FL Zip Code 33155 Phone (305) 6699979 FAX

State Association or Affiliate FYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Three Lakes Park (13375 SW 136 St. Miami, FL 33186) **TEAM ENTRY DEADLINE:** 03/03/09

Date(s) of Tournament or Games March 13, 2010 Estimated # of Teams 100

Tournament or Games Director or Contact Person Daniel Prenat Phone (305) 6690101 W

Address 7444 SW 48th St. Email Danny@copalatina.com Phone (786) 4871018 H

City Miami State FL Zip Code 33155 Phone (305) 6699979 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- 8 8/1/ 1	A,B,C,D,E,F,G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	10	30 Min	4	<input checked="" type="checkbox"/>	3	135	<input type="checkbox"/>
U- 10 8/1/ 99	A,B,C,D,E,F,G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	10	30 Min	5	<input checked="" type="checkbox"/>	3	135	<input type="checkbox"/>
U- 12 8/1/ 97	A,B,C,D,E,F,G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	8	30 Min	5	<input checked="" type="checkbox"/>	3	135	<input type="checkbox"/>
U- 14 8/1/ 95	A,B,C,D,E,F,G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	8	30 Min	5	<input checked="" type="checkbox"/>	3	135	<input type="checkbox"/>
U- 16 8/1/ 93	A,B,C,D,E,F,G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	8	30 Min	5	<input checked="" type="checkbox"/>	3	135	<input type="checkbox"/>
U- 19 8/1/ 90	A,B,C,D,E,F,G	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	8	30 Min	5	<input checked="" type="checkbox"/>	3	135	<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<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 – US Youth Soccer Members and Affiliates only.

Team will be restricted to teams within the national state association Teams will be invited from all US Youth State Associations/Affiliates only.


UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: AYSO, YMCA, US Club, All USSF Affiliates

Foreign 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 [Signature] Date 1/22/10

APPROVAL (For Official Use Only)

 STATE ASSOCIATION OF AFFILIATE FYSA Date 2-16-10

By [Signature] Title Office Manager

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.