



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

20th Annual Seminole Girls FALL FESTIVAL

Name of Tournament or Games: 20th Annual Seminole Girls FALL FESTIVAL Website URL: Players Sports Marketing.com

Hosting Organization: Florida Soccer Alliance Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization: Bill Hollenbach Title: President Phone () _____ W

Address: 1400 Seminole Soccer Loop Email: _____ Phone () _____ H

City: SANFORD State: FL Zip Code: 32771 Phone () _____ FAX

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

Location of Tournament or Games: Seminole Soccer Complex **TEAM ENTRY DEADLINE:** _____

Date(s) of Tournament or Games: OCT 10th & 11th 2009 Estimated # of Teams: _____

Tournament or Games Director or Contact Person: VIVIAN FORDE Phone: 407 320-1811 W

Address: PO Box 953187 Email: BunKoBeHy@AOL.com Phone () _____ H

City: Lake Mary State: FL Zip Code: 32795 Phone: 407 320-0902 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 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	2x25	6	<input checked="" type="checkbox"/>	3	\$425	<input type="checkbox"/>
U-10 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	2x25	6	<input checked="" type="checkbox"/>	3	\$425	<input type="checkbox"/>
U-11 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	2x30	8	<input checked="" type="checkbox"/>	3	\$475	<input type="checkbox"/>
U-12 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	2x30	8	<input checked="" type="checkbox"/>	3	\$475	<input type="checkbox"/>
U-13 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	2x35	11	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U-14 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	2x35	11	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U-15 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	2x35	11	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U-16 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	2x35	11	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U-17 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	2x35	11	<input checked="" type="checkbox"/>	3	\$525	<input type="checkbox"/>
U-19 8/1/	RT, S1-S3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	2x35	11	<input checked="" type="checkbox"/>	3	\$525	<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: FYSA, USYSA, AYSO
- 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: 12/19/08

APPROVAL (For Official Use Only)

STATE ASSOCIATION OR AFFILIATE: FYSA Date: 5-6-09

By: [Signature] Title: Dir of Prog/Inv

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.