



US Youth Soccer
A Proud Member of US Soccer



Please Type or Print Clearly - Do Not Staple

Affiliated with the Federation International de Football Association

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games 4th Annual LUSC March Madness Soccer Shootout Website URL: www.largosoccer.org

Hosting Organization Largo United Soccer Club Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Ben Sousa Title Tournament Director Phone (813) 8176157 W

Address 13355 Park Blvd Email largosoccertournaments@hotmail.com Phone () _____ H

City Seminole State FL Zip Code 33776 Phone (727) 3936137 FAX

State Association or Affiliate FYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Largo Soccer Complex, Whitesell Softball Complex **TEAM ENTRY DEADLINE:** March 7, 2011

Date(s) of Tournament or Games March 18-20 Estimated # of Teams 70

Tournament or Games Director or Contact Person Ben Sousa Phone (813) 8176157 W

Address 13355 Park Blvd Email largosoccertournaments@hotmail.com Phone () _____ H

City Seminole State FL Zip Code 33774 Phone (727) 3936137 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/	1	s1,s2,s3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	6	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U-	10	8/1/	0	s1,s2,s3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	6	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U-	11	8/1/	99	s1,s2,s3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	8	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U-	12	8/1/	98	s1,s2,s3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	8	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U-	13	8/1/	97	s1,s2,s3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	500	<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"/>
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: All USSF Affiliates, US Club Soccer

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 *Ben Sousa* Date 12/1/10



STATE ASSOCIATION OR AFFILIATE

APPROVAL
(For Official Use Only)

By *[Signature]*

Date 1/7/11
Title _____

RECEIVED

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.

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