



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 Central Florida Spring Kick-Off Website URL: cfusc.com

Hosting Organization Central Florida United Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Hue Menzies Title Executive Director Phone (407) -6954957 W

Address 6984 Aloma Avenue Email cfutournament@cfl.rr.com Phone () _____ H

City Winter Park State FL Zip Code 32792 Phone (407) -6956186 FAX

State Association or Affiliate FYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Oviedo and Winter Springs **TEAM ENTRY DEADLINE:** February 19th, 2010

Date(s) of Tournament or Games February 27 and 28 Estimated # of Teams 50

Tournament or Games Director or Contact Person Leslie KleeB Phone () _____ W

Address 6984 Aloma Avenue Email cfutournament@cfl.rr.com Phone (407) -3664402 H

City Winter Park State FL Zip Code 32792 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 8/1/	Recreation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	50	6	<input checked="" type="checkbox"/>	3	210	<input type="checkbox"/>
U- 10 8/1/	Recreation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	50	6	<input checked="" type="checkbox"/>	3	210	<input type="checkbox"/>
U- 11 8/1/	Recreation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	60	8	<input checked="" type="checkbox"/>	3	240	<input type="checkbox"/>
U- 12 8/1/	Recreation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	60	8	<input checked="" type="checkbox"/>	3	240	<input type="checkbox"/>
U- 13 8/1/	Recreation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	70	11	<input checked="" type="checkbox"/>	3	260	<input type="checkbox"/>
U- 14 8/1/	Recreation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	70	11	<input checked="" type="checkbox"/>	3	260	<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: _____
- 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 1/18/2010

APPROVAL
(For Official Use Only)



STATE ASSOCIATION AFFILIATE FYSA Date 1-20-10

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.