

Please Type or Print Clearly - Do Not Staple

### 1. APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games ORANGE CLASSIC INVIT Website URL: WWW.THEORANGECLASSIC.COM  
 Hosting Organization ORANGE CLASSIC S.C. Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization CATHY TUEETS Title DIRECTOR Phone 305 492 2252 W  
 Address 1344 SEAGRAPE Email INED@THEORANGECLASSIC.COM Phone 305 492 2252 H  
 City WESTON State FL Zip Code 33326 Phone 806 596 6245 FAX  
 State Association or Affiliate FLORIDA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games PLANTATION **TEAM ENTRY DEADLINE:** 11-15-19  
 Date(s) of Tournament or Games DEC. 28, 29, 30 2019 Estimated # of Teams 125  
 Tournament or Games Director or Contact Person CATHY TUEETS Phone 305 492 2252  
 Address 1344 SEAGRAPE Email CATHYTUEETS@GMAIL.COM Phone 305 492 2252 H  
 City WESTON State FL Zip Code 33326 Phone 508 596 6245 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-19	1/1/ 01 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	90 MIN	11	<input type="checkbox"/>	3	950.00	N/A
U-17	1/1/ 03 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	90 MIN	11	<input type="checkbox"/>	3	950.00	N/A
U-16	1/1/ 04 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	50 MIN	11	<input type="checkbox"/>	3	950.00	N/A
U-15	1/1/ 05 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	70 MIN	11	<input checked="" type="checkbox"/>	3	950.00	N/A
U-14	1/1/ 06 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	60 MIN	11	<input checked="" type="checkbox"/>	3	950.00	N/A
U-13	1/1/ 07 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	60 MIN	11	<input checked="" type="checkbox"/>	3	500.00	N/A
U-12	1/1/ 08 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50 MIN	9	<input checked="" type="checkbox"/>	3	500.00	N/A
U-11	1/1/ 09 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50 MIN	9	<input checked="" type="checkbox"/>	3	500.00	N/A
U-10	1/1/ 10 U7, 51, 52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50 MIN	7	<input checked="" type="checkbox"/>	3	500.00	N/A
U-	1/1/	<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 -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: ALL U.S.S.F. AFFILIATES
- International Teams as listed: TIBA

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

*Cathy Tueets*

Date 4-26-19

APPROVAL



*JUSA*  
*Dee/Jan*

Date 5/9/19

Title Executive Director

**APPROVED**