



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 Snohomish Recreational Cup Website URL: www.snohomishyouthsoccer.org
 Hosting Organization SYSC Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Hal Uderitz Title Rep Phone () 360/568-2577 W
 Address 27 Pine Ave Email snohomishsoccer@snohomishyouthsoccer.org Phone () 360/568-2577 H
 City Snohomish State WA Zip Code 98290 Phone () 360/568-3064 FAX
 State Association or Affiliate SnYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games same as above TEAM ENTRY DEADLINE: August 15, 2012
 Date(s) of Tournament or Games September 1-2, 2012 Estimated # of Teams 40
 Tournament or Games Director or Contact Person Ricardo Rivera Phone () 425-931-7978 W
 Address 27 Pine Ave Email ricardo.vprec@snohomishyouthsoccer.org Phone () 360-568-2577 H
 City Snohomish State WA Zip Code 98290 Phone () 360-568-2577 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- 10 8/1/	S123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	50	6	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 11 8/1/	S123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	60	9	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U- 12 8/1/	S123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U- 13 8/1/	S123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U- 14 8/1/	S123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U- 9 8/1/	S123	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	50	6	<input checked="" type="checkbox"/>	3	200	<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input checked="" 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 –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: US Club
 International 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

Hal Uderitz

Digitally signed by Hal Uderitz
 DN: cn=Hal Uderitz, o=SYSC, ou=SYSC, email=snohomishsoccer@snohomishyouthsoccer.org, c=US
 Date: 2011.11.21 16:48:31 -0800

Date 11/21/2011

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By _____

Date _____

Title _____

cko 02/13/12