



Youth Soccer/Kentucky Youth Soccer Association  
APPLICATION TO HOST TOURNAMENT OR GAMES

Name of Tournament or Games:2015 Spooktacular      Tournament Web Site Address (URL):Wwww.iscspooktacular.com

Hosting League Organization: District 1 - Independence      Teams of Types Accepted:   ☐Select   ☐Recreational   ☐select & Rec

Designate Official of Hosting Org Blaine Edmonds      Title \_\_\_\_\_      Work Number (859) 344-3388

Address 560 Grouse Ct      \_\_\_\_\_      Home Phone Number (859) 727-3055

City Elsmere      State KY      Zip 41018-2696      Fax \_\_\_\_\_

National State Association \_\_\_\_\_      Guest Referee Applications Accepted \_\_\_\_\_

City or Town of Tournament or Games: Fort Mitchell      Application Deadline \_\_\_\_\_

Dates of Tournament or Games: 10/16/2015 - 10/18/2015      Estimated Number of Teams \_\_\_\_\_

Tournament Director/Contact Person Blaine dupEdmonds      Work Phone: (859) 391-3184

Street Address 2045 Dixie Hwy      Tournament Director/Contact Email Address: \_\_\_\_\_

City Fort Mitchell      State KY      Zip 41011-2609      Phone Number: \_\_\_\_\_

Ages	Team Types (ie.: S1, S2)	Boys	Girls	Roster Size	# of Guest Players	Length of Games (mins)	# of Players on Field	Awards	Min. # of Games	Entry Fees	Bond (Leave blank if none)	Message
C& U10	Recreatio		X	12	3	48	6	X	3	275		
C& U10	Recreatio	X	X	12	3	48	6	X	3	275		
Rec U08	Recreatio		X	12	3	48	6	X	3	275		
Rec U08	Recreatio	X	X	12	3	48	6	X	3	275		
Rec U10	Recreatio		X	12	3	48	6	X	3	275		
Rec U10	Recreatio	X	X	12	3	48	6	X	3	275		

- ☐ **RT Restricted Tournament** – US Youth Soccer Members and Affiliates only.
- ☐ Teams will be restricted to teams within the national state association
- ☐ Teams will be invited from all US Youth State Associations/Affiliates
- ☐ **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 AGREEMENTN and its applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization \_\_\_\_\_

Date: \_\_\_\_\_

*Lisa Dwall*

APPROVAL

STATE ASSOCIATION OR AFFILIATE

KENTUCKY YOUTH SOCCER ASSOCIATION

Date: \_\_\_\_\_

Kentucky Youth Soccer Association – 158 Constitution St, Lexington, KY 41005

In granting this permission to host tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging or injury to persons sustained in the course of approved event