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

Name of Tournament or Games: Blessed Sacrament Fall   Tournament Web Site Address (URL): _____

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

Designate Official of Hosting Org Julie Hegerty   Title_____   Work Number _____

Address 37 Valeside Dr   ....- _____ Home Phone Number (859) 363-7829

City Covington   State KY Zip 41017-9790   Fax

National State Association _____   Guest Referee Applications Accepted

City or Town of Tournament or Games: Fort Mitchell   Application Deadline _____

Dates of Tournament or Games: 11/04/2016 - 11/06/2016   Estimated Number of Teams 25

Tournament Director/Contact Person Lance dupWells   Work Phone: (859) 801-3418

Street Address 73 Thompson Ave   Tournament Director/Contact Email Address: _____

City Fort Mitchell   State KY Zip 41017-2730 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
Rec U08	NKSL		X	8	0	45 min	5		3	250.00		
Rec U08	NKSL	X		8	0	45 min	5		3	250.00		
Rec U10	NKSL		X	14	0	50 min	7		3	250.00		
Rec U10	NKSL	X		14	0	50 min	7		3	250.00		
Rec U12	NKSL		X	18	0	50 min	9		3	250.00		
Rec U12	NKSL	X		18	0	50 min	9		3	250.00		
Rec U14	NKSL		X	18	0	50 min	9		3	250.00		

☐ **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 AGREEMETN and its applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization _____   Date: _____

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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