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

Name of Tournament or Games: Stride
Tournament Web Site Address (URL): _____
Hosting League Organization: District 2 - Commonwealth
Teams of Types Accepted: ☐Select ☐Recreational ☐select & Rec
Designate Official of Hosting Org Jason Heflin
Title_____ Work Number (859) 276-2571
Address 625 Republic Ct
9Y·l·ll schroeder.csc@gmail.com Home Phone Number (859) 539-6874
City Lexington ____State KY Zip 40509-4354
Fax
National State Association _____
Guest Referee Applications Accepted
City or Town of Tournament or Games: Lexington
Application Deadline _____
Dates of Tournament or Games: 05/06/2016 - 05/08/2016
Estimated Number of Teams 80
Tournament Director/Contact Person Darin Schroeder
Work Phone: (859) 494-4224
Street Address 1224 Kannapolis Pl
Tournament Director/Contact Email Address: schroeder.csc@gmail.com
City Lexington State KY Zip 40513-1243
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
Com U09	Competiti		X	12	3	20	6	X	3	$450		
Com U10	Competiti	X	X	12	3	25	6	X	3	$450		
Com U11	Competiti	X	X	12	3	25	8	X	3	$500		
Com U12	Competiti	X	X	14	3	25	8	X	3	$500		
Com U13	Competiti	X	X	18	3	30	11	X	3	$550		
Com U14	Competiti	X	X	18	3	30	11	X	3	$550		
Com U15	Competiti		X	18	3	35	11	X	3	$600		
Com U16	Competiti	X	X	18	3	35	11	X	3	$600		
Com U17	Competiti	X	X	18	3	35	11	X	3	$650		
Com U19	Competiti	X	X	18	3	35	11	X	3	$650		

☐ **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: _____

Lisa Duvall

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