



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

Name of Tournament or Games: Central Soccer Cup Tournament Web Site Address (URL): www.centralsoccercup.com

Hosting League Organization: District 3 - Atletico Flames Teams of Types Accepted: ☐Select ☐Recreational ☐select & Rec

Designate Official of Hosting Org James Mason Title _____ Work Number (270) 505-5605

Address 799 Pine Valley Dr _____ jon@nationalsoccerevents. Home Phone Number (270) 505-5605

City Elizabethtown State TN Zip 42701-6800 Fax _____

National State Association _____ Guest Referee Applications Accepted _____

City or Town of Tournament or Games: Knoxville Application Deadline _____

Dates of Tournament or Games: 11/07/2015 - 11/08/2015 Estimated Number of Teams 80

Tournament Director/Contact Person Jon Schneider Work Phone: (865) 643-4004

Street Address 2742 Berringer Station Ln Tournament Director/Contact Email Address: jon@nationalsoccerevents.com

City Knoxville State TN Zip 37932-1491 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 U10	S1, S2, S3	X	X	12	3	50	6	X	3	425		
Com U11	S1, S2, S3	X	X	14	3	60	8	X	3	500		
Com U12	S1, S2, S3	X	X	14	3	60	8	X	3	500		
Com U13	S1, S2, S3	X	X	18	3	70	11	X	3	595		
Com U14	S1, S2, S3	X	X	18	3	70	11	X	3	595		
Com U15	S1, S2, S3	X	X	18	3	70	11	X	3	595		
Com U16	S1, S2, S3	X	X	20	3	70	11	X	3	595		
Com U17	S1, S2, S3	X	X	20	3	70	11	X	3	595		
Com U18	S1, S2, S3	X	X	20	3	70	11	X	3	595		
Com U19	S1, S2, S3	X	X	20	3	70	11	X	3	595		

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

Signature of Designated Official of Hosting Organization _____ Date: _____

Lisa Swall

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



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Com U15	S1, S2, S3	X	X	18	3	70	11	X	3	595		
Com U16	S1, S2, S3	X	X	20	3	70	11	X	3	595		
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STATE ASSOCIATION OR AFFILIATE KENTUCKY YOUTH SOCCER ASSOCIATION Date: _____

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