



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 Ohio South Presidents Cup Website URL: http://www.osysa.com/tournaments/ohio_
 Hosting Organization Ohio South STATE - Ohio South Youth Type of Tournament: ☐ Select ☐ Recreational ☐ Select & Rec
 Designate Official of Hosting Organization Jim Waldron Title _____ Phone (513) 576-9555 W
 Address OSA Email office@osysa.com Phone (513) 576-9555 H
 City Maineville State OH Zip Code 45039 Phone _____ FAX _____
 State Association or Affiliate _____ Guest Referees Applications Accepted ☐ Yes ☐ No
 Location of Tournament or Games Dayton OH **TEAM ENTRY DEADLINE:** _____
 Date(s) of Tournament or Games 04/30/2016 - 05/15/2016 Estimated # of Teams 150
 Tournament or Games Director or Contact Person Carol Maas Heather Lewis Phone (937) 233-7958 W
 Address PO Box 24232 Email carolmsoccer@aol.com Phone _____ H
 City Dayton State OH Zip Code 45424-0232 Phone _____ 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
S2	U10	X	X	12			6	X	3	450	
S2	U11	X	X	14			8	X	3	450	
S2	U12	X	X	14			8	X	3	450	
S2	U13	X	X	22			11	X	3	475	
S2	U14	X	X	22			11	X	3	475	
S2	U15	X	X	22			11	X	3	475	
S2	U16	X	X	22			11	X	3	475	
S2	U17	X	X	22			11	X	3	475	

*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: _____
 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 _____

Date _____

APPROVAL

(For Official Use Only) STATE
ASSOCIATION OR AFFILIATE

Ohio Soccer Association

Date _____

By _____

Title _____

State Commissioner

