

Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games			Website URL:		
Mead Cusa Cup			www.cusacup.com		
Hosting Organization			Type of Tournament:		
Approved - Sanctioned Tournament			<input type="checkbox"/> Select <input type="checkbox"/> Recreational <input type="checkbox"/> Select & Rec		
Designate Official of Hosting Organization			Title		
James Waldron					
Address			Phone		
City			State		
Dayton			OH		
Zip Code			Phone		
			FAX		
State Association or Affiliate			Guest Referees Applications Accepted		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Location of Tournament or Games			TEAM ENTRY DEADLINE:		
Dayton					
Date(s) of Tournament or Games			Estimated # of Teams		
08/30/2014 - 09/01/2014			560		
Tournament or Games Director or Contact Person			Phone		
Dan Monahan			(937) 885-7816		
Address			Phone		
1247 Timberhawk Trl					
City			State		
Dayton			OH		
Zip Code			Phone		
45458-9536			FAX		

[illegible]

*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

