

Please Type or Print Clearly – Do Not Staple

## APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games		WAM Soccer Invitational		Website URL:		http://www.wamspringinvitational.com	
Hosting Organization		District 3 - Central Ohio Soccer Assoc.		Type of Tournament:		<input type="checkbox"/> Select <input type="checkbox"/> Recreational <input type="checkbox"/> Select & Rec	
Designate Official of Hosting Organization		Bob Tener		Title		Phone _____ W	
Address		Please Update		Email		Phone (111) 111-1111 H	
City		Update		State OH		Zip Code 11111 Phone _____ FAX	
State Association or Affiliate				Guest Referees Applications Accepted		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Tournament or Games		Westerville OH		TEAM ENTRY DEADLINE:			
Date(s) of Tournament or Games		09/20/2014 - 09/21/2014		Estimated # of Teams		225	
Tournament or Games Director or Contact Person		Don Dopps		Phone		(614) 890-1207 W	
Address		921 Eastwind Dr Ste 114		Email doppsdon@yahoo.com		Phone _____ H	
City		Westerville		State OH		Zip Code 43081-3363 Phone _____ 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

