



Please Type or Print Clearly – Do Not Staple

## APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Cincinnati West Go-o-o-oalrilla Classic Website URL: http://go-o-o-oalrillaclassic.com/  
 Hosting Organization District 1 - Cincinnati United Soccer League Type of Tournament: ☐ Select ☐ Recreational ☐ Select & Rec  
 Designate Official of Hosting Organization Jim Waldron Title \_\_\_\_\_ Phone \_\_\_\_\_ W  
 Address 188 Hidden Hills Dr Email gcslsoccer1@gmail.com Phone \_\_\_\_\_ H  
 City Fairfield State OH Zip Code 45014-8606 Phone \_\_\_\_\_ FAX  
 State Association or Affiliate \_\_\_\_\_ Guest Referees Applications Accepted ☐ Yes ☐ No  
 Location of Tournament or Games North Bend OH **TEAM ENTRY DEADLINE:** \_\_\_\_\_  
 Date(s) of Tournament or Games 08/12/2017 - 08/13/2017 Estimated # of Teams 150  
 Tournament or Games Director or Contact Person Tim Klawitter Phone (513) 675-9884 W  
 Address 169 Saint Annes Ave Email tklawitter23@gmail.com Phone \_\_\_\_\_ H  
 City North Bend State OH Zip Code 45052-9656 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
S1-4 U08	ALL	X	X	14	4	25	7	X	3	450	
S1-4 U09	ALL	X	X	14	4	25	7	X	3	450	
S1-4 U10	ALL	X	X	14	4	25	7	X	3	450	
S1-4 U11	ALL	X	X	16	4	25	9	X	3	500	
S1-4 U12	ALL	X	X	16	4	25	9	X	3	500	
S1-4 U13	ALL	X	X	18	4	30	11	X	3	550	
S1-4 U14	ALL	X	X	18	4	30	11	X	3	550	
S1-4 U15	ALL	X	X	18	4	30	11	X	3	550	

\*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: \_\_\_\_\_
- ☐ 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

