



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 United Futbol Cup Website URL: www.unitedfutbolcup.com
 Hosting Organization District 3 - Pickerington Youth Soccer Type of Tournament: ☐ Select ☐ Recreational ☐ Select & Rec
 Designate Official of Hosting Organization Rob Warner Title _____ Phone _____ W
 Address Please Update Email treasurer@pasasoccer.org Phone (111) 111-1111 H
 City Update State OH Zip Code 11111 Phone _____ FAX _____
 State Association or Affiliate _____ Guest Referees Applications Accepted ☐ Yes ☐ No
 Location of Tournament or Games Pickerington OH **TEAM ENTRY DEADLINE:** _____
 Date(s) of Tournament or Games 10/08/2016 - 10/09/2016 Estimated # of Teams 100
 Tournament or Games Director or Contact Person dupJosh Racettedup Phone (614) 563-2024 W
 Address 50 Hill Rd S Email _____ Phone _____ H
 City Pickerington State OH Zip Code 43147-1219 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	Any	X	X	9	4	40	4v4	X	3	475.00	
S1-4 U08	Any	X	X	12	4	40	7v7	X	3	490.00	
S1-4 U09	Any	X	X	12	4	50	7v7	X	3	490.00	
S1-4 U10	Any	X	X	12	4	50	7v7	X	3	490.00	
S1-4 U11	Any	X	X	14	4	60	9v9	X	3	525.00	
S1-4 U12	Any	X	X	14	4	60	9v9	X	3	525.00	
S1-4 U13	Any	X	X	18	4	70	11v11	X	3	550.00	
S1-4 U14	Any	X	X	18	4	70	11v11	X	3	550.00	
S1-4 U15	Any	X	X	18	4	70	11v11	X	3	595.00	

*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

