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## APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Fall Ball Classic - Boys Website URL: tfatournaments.com  
 Hosting Organization District 1 - Tfa-Western Jr. League Type of Tournament: ☐ Select ☐ Recreational ☐ Select & Rec  
 Designate Official of Hosting Organization Dan Puterbaugh Title \_\_\_\_\_ Phone \_\_\_\_\_ W  
 Address PO Box 45 Email lhaussler@tfacincinnati.com Phone (513) 467-9910 H  
 City Cleves State OH Zip Code 45002-0045 Phone \_\_\_\_\_ FAX  
 State Association or Affiliate \_\_\_\_\_ Guest Referees Applications Accepted ☐ Yes ☐ No  
 Location of Tournament or Games Cincinnati OH **TEAM ENTRY DEADLINE:** \_\_\_\_\_  
 Date(s) of Tournament or Games 10/01/2016 - 10/02/2016 Estimated # of Teams 250  
 Tournament or Games Director or Contact Person Zach Wagner Phone (513) 255-3603 W  
 Address PO Box 19854 Email tournamentdirector@tfacincinnati.com Phone \_\_\_\_\_ H  
 City Cincinnati State OH Zip Code 45219-0854 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	S1,S2,S3,S4	X		12	2	50	7	X	3	400	
S1-4 U09	S1,S2,S3,S4	X		12	2	50	7	X	3	525	
S1-4 U10	S1,S2,S3,S4	X		12	2	50	7	X	3	525	
S1-4 U11	S1,S2,S3,S4	X		14	3	60	9	X	3	575	
S1-4 U12	S1,S2,S3,S4	X		14	3	60	9	X	3	575	
S1-4 U13	S1,S2,S3,S4	X		18	4	70	11	X	3	625	
S1-4 U14	S1,S2,S3,S4	X		18	4	70	11	X	3	625	
S1-4 U15	S1,S2,S3,S4	X		18	4	70	11	X	3	625	

\*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

