



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 Party on the Pitch Website URL: www.cutournaments.com
 Hosting Organization Ohio Soccer Association - Ohio Soccer Type of Tournament: ☐ Select ☐ Recreational ☐ Select & Rec
 Designate Official of Hosting Organization John Ruffolo Title _____ Phone (513) 576-9555 W
 Address OSA Email office@osysa.com Phone (513) 576-9555 H
 City Maineville State OH Zip Code 45039 Phone _____ FAX _____
 State Association or Affiliate _____ Guest Referees Applications Accepted ☐ Yes ☐ No
 Location of Tournament or Games Trenton OH **TEAM ENTRY DEADLINE:** _____
 Date(s) of Tournament or Games 08/26/2022 - 08/28/2022 Estimated # of Teams 200
 Tournament or Games Director or Contact Person Jaimee Wilcox Phone (513) 515-2601 W
 Address PO Box 522 Email wilcox1999@gmail.com Phone _____ H
 City Trenton State OH Zip Code 45067-0522 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 U09 | s1-4 | X | X | 14 | 5 | 50 | 7 | X | 3 | 600 | |
| S1-4 U10 | s1-4 | X | X | 14 | 5 | 50 | 7 | X | 3 | 600 | |
| S1-4 U11 | s1-4 | X | X | 18 | 5 | 50 | 9 | X | 3 | 650 | |
| S1-4 U12 | s1-4 | X | X | 18 | 5 | 50 | 9 | X | 3 | 650 | |
| S1-4 U13 | s1-4 | X | X | 22 | 5 | 50 | 11 | X | 3 | 725 | |
| S1-4 U14 | s1-4 | X | X | 22 | 5 | 50 | 11 | X | 3 | 725 | |
| S1-4 U15 | s1-4 | X | X | 22 | 5 | 50 | 11 | X | 3 | 725 | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

*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

