



US Youth Soccer/Ohio South Youth Soccer

APPLICATION TO HOST A TOURNAMENT OR GAMES



Name of Tournament or Game MASC (Mid American Soccer Classic) Website URL: www.masctournament.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 8108 Cabinet Cir Email gsewaldron@gmail.com (513) 474-2197 H

City Cincinnati State OH Zip 45244-2720 Fax _____

State Association or Affiliate _____ Guest Referee Applications Accepted: Yes No

Location of Tournament or Games Hamilton OH **TEAM ENTRY DEADLINE:** _____

Date(s) of Tournament or Games 04/07/2017 - 04/09/2017 Estimated # of Teams 250

Tournament or Games Director or Contact Person Karen Phillips Phone (513) 659-4549 W

Address 7241 Morris Rd E-mail masctournament@gmail.com H

City Hamilton State OH Zip 45011-5432 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		X	14	4	50	7	X	3	600.00	
S1-4	U10		X	14	4	50	7	X	3	600.00	
S1-4	U11		X	16	4	60	9	X	3	625.00	
S1-4	U12		X	16	4	60	9	X	3	625.00	
S1-4	U13		X	18	4	60	11	X	3	675.00	
S1-4	U14		X	18	4	60	11	X	3	675.00	
S1-4	U15		X	18	4	70	11	X	3	675.00	
S1-4	U16		X	18	4	70	11	X	3	675.00	
S1-4	U17		X	18	4	70	11	X	3	675.00	
S1-4	U18		X	18	4	70	11	X	3	675.00	
S1-4	U18		X	18	4	70	11	X	3	675.00	

- RT RESTRICTED TOURNAMENT** - US Youth Soccer Members and Affiliates only.
- Teams will be restricted to teams within the national state association. Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT** Other US Soccer Members as listed: _____
- Foreign 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 South Youth Soccer Association Date _____



By *Carol J. Anderson* Title State Commissioner

APPROVED

Ohio South Youth Soccer - 25 Whitney Drive, Suite 104, Milford, Ohio 45150

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.