



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 Lake Stevens Jingle Bell Bash Website URL: lssc.com  
 Hosting Organization Lake Stevens Soccer Club Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Martine Bush Title VP Phone (425) 334-8668 W  
 Address 5002 - 117th Ave NE Email martine@northwestrealty.com Phone (425) 334-8668 H  
 City Lake Stevens State WA Zip Code 98258 Phone ( ) \_\_\_\_\_ FAX \_\_\_\_\_  
 State Association or Affiliate WSYSA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Lochsby Fields, Lake Stevens TEAM ENTRY DEADLINE: Nov 23rd, 2009  
 Date(s) of Tournament or Games December Estimated # of Teams 25  
 Tournament or Games Director or Contact Person Martine Bush Phone ( ) \_\_\_\_\_ W  
 Address 5002 - 117th Ave NE Email martine@northwestrealty.com Phone 425-334-8668 H  
 City Lake Stevens State WA Zip Code 98258 Phone ( ) \_\_\_\_\_ FAX \_\_\_\_\_

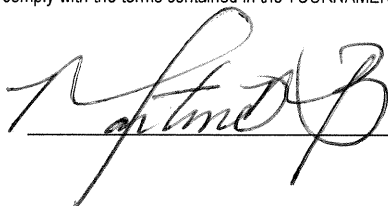
Age Groups Accepted	Type(s) of Team Accepted *	B	G	Roster Size	# Guest Players Allowed	Length of Games	# Players on Field	Awards	Minimum # of Games	Entry Fee	Bond
U-8 8/1/	rec	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	50 min	4	<input type="checkbox"/>	3	150	<input type="checkbox"/>
U-9 8/1/	rec	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9	3	50 min	5	<input type="checkbox"/>	3	175	<input type="checkbox"/>
U-10 8/1/	rec	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	50 min	6	<input type="checkbox"/>	3	200	<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>

\*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: \_\_\_\_\_
- International 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 3/2/09

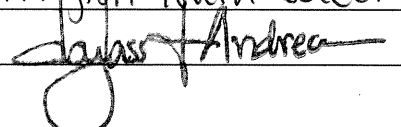
### APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Washington Youth Soccer

Date 9/17/2009

By



Title

President