



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 FCVSA Fall Jamboree Website URL: WWW.T-CVSA

Hosting Organization Tri-Cities Youth Soccer Association Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization ED Carnes Title Tournament Director Phone 509-845-1889 MC

Address 3901 Meadow Beauty DR Email edcarnes@tricytexas.com Phone 509-547-1201 H

City Prosser State WA Zip Code 99301 Phone 509-549-0895 FAX

State Association or Affiliate Washington Youth Soccer Guest Referees Applications Accepted Yes No

Location of Tournament or Games T-CVSA - Prosser Soccer Complex TEAM ENTRY DEADLINE: 10/24/09

Date(s) of Tournament or Games November 7, 2009 Estimated # of Teams 60

Tournament or Games Director or Contact Person ED Carnes Phone () _____ W

Address _____ Email _____ Phone () _____ H

City Same as above State _____ Zip Code _____ 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-6 8/1/	RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6	3	12 m / 25	3	<input type="checkbox"/>	3	80	<input type="checkbox"/>
U-7 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	6		15 m / 25	3	<input type="checkbox"/>		80	<input type="checkbox"/>
U-8 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	8		20	4	<input type="checkbox"/>		110	<input type="checkbox"/>
U-9 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	9		20	5	<input type="checkbox"/>		130	<input type="checkbox"/>
U-10 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	10		20	6	<input type="checkbox"/>		160	<input type="checkbox"/>
U-11 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	14		25	9	<input type="checkbox"/>			<input type="checkbox"/>
U-12 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	16		25	9	<input type="checkbox"/>			<input type="checkbox"/>
U-13 8/1/		<input type="checkbox"/>	<input type="checkbox"/>	18		>30	11	<input type="checkbox"/>			<input type="checkbox"/>
U-14 8/1/		<input type="checkbox"/>	<input type="checkbox"/>				11	<input type="checkbox"/>			<input type="checkbox"/>
U-15 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: AYSO
- 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 Jessica Demaree/For ED Carnes Date 1/8/09

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE WSYSA Date 3-23-09

By [Signature] Title VP of Rec.