



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

C.D.Y.S.L.
 19 Aviation Road
 Suite 9
 Albany, NY 12205-1142

(Handwritten initials)

Name of Tournament or Games Mountain Mayhem Website URL: www.northernunitedsc.com
 Hosting Organization Northern United SC Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Ron Wolfe Title Co-President Phone () 518.812.64 W
 Address 16 Stewart Ave Email rwolfe@hjhllc.com Phone () _____ H
 City Glens Falls State NY Zip Code 12801 Phone () _____ FAX
 State Association or Affiliate ENYYSL Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Ridge Jenkinsville, Queensbury NY and Go **TEAM ENTRY DEADLINE:** _____
 Date(s) of Tournament or Games May 9, 2020 Estimated # of Teams 45
 Tournament or Games Director or Contact Person Ron wolfe Phone () 518.812.64 W
 Address same as above Email _____ Phone () 518.792.48 H
 City _____ State _____ Zip Code _____ Phone () 518.747.84 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	1/1/ S1 & S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	20	2 x 4	<input checked="" type="checkbox"/>	4	\$350	<input type="checkbox"/>
U- 10	1/1/ " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	25	7	<input checked="" type="checkbox"/>	4	375	<input type="checkbox"/>
U- 12	1/1/ " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	25	9	<input checked="" type="checkbox"/>	4	425	<input type="checkbox"/>
U- 14	1/1/ " "	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input checked="" type="checkbox"/>	4	495	<input type="checkbox"/>
U- 16	1/1/ " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input checked="" type="checkbox"/>	4	495	<input type="checkbox"/>
U- 18	1/1/ " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input checked="" type="checkbox"/>	4	495	<input type="checkbox"/>
U-	1/1/	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	1/1/	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	1/1/	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	1/1/	<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

Ron Wolfe

Date 2/14/2020

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By ENYUSA



Date



By Miane Kn...

Title

office