

Youth Soccer/Kentucky Youth Soccer Association APPLICATION TO HOST TOURNAMENT OR GAMES

Owensboro United SOCCER Name of Tournament or Games: Fall Cup 2025 Tournament Web Site Address (URL): Owensborounited.com Hosting League Organization: OWB United SC Teams of Types Accepted: □Select □Recreational ☑select & Rec Designate Official of Hosting Org Leigha Winslow Title Tournament Director 270-977-0325 Work Number ____ Address 4006 Vincent Station Dr. Email Address tournaments.oborounited Home Phone Number City Owensboro State Ky Zip 42303 @gmail.com Fax National State Association KY Guest Referee Applications Accepted YES City or Town of Tournament or Games: ___ Owensboro Application Deadline October 19th Dates of Tournament or Games: November 1-2 Estimated Number of Teams _____85 Tournament Director/Contact Person Leigha Winslow Work Phone: 270-977-0325 Street Address same as above Tournament Director/Contact Email Address: tournaments.oborounited@gmail.com

Ages	Team Types (ie.: S1, S2)	Boys	Girls	Roster Size	# of Guest Players	Length of Games (mins)	# of Players on Field	Awards	Min. # of Games	Entry Fees	Bond (Leave blank if none)	Message
U9/U10	S2	YES	YES	14	3	50	7	YES	3	\$670		
J11/U12	S2	YES	YES	18	3	50	9	yes	3	\$770		
U13/U18	S2	YES	YES	22	3	60	11	yes	3	\$870		
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Signature Ker	Appro	ved	Eleja Olishi	Organ	nization	Leigha (U	na k o		Date: _	06-2	21-25	<u> </u>
	2024	-25	10			APPROVA					ſ	1
STATE A	SOCIATIO)	FELLIATE	~	KENTUC	KY YOUTH	SOCCER	ASSOCIATI		Date:	P 2	1/25
	Ev		ntucky Yout Director						_		1.0	•
In grantir	ng this be	THISSION	Director to host tou	rnament o	r games	, neither U	S Youth	Soccer nor	its State A	Association	ns or Affili	ates shall
pe liable	for transp	ortatioi	n, lodging or	injury to i	persons :	sustained i	n the coi	urse of app	roved eve	ent		6 11 6

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