



Name of Tournament or Games: _____ Tournament Web Site Address (URL): _____

Hosting League Organization: _____ Teams of Types Accepted: ☐Select ☐Recreational ☐select & Rec

Designate Official of Hosting Org _____ Title _____ Work Number _____

Address _____ Email Address _____ Home Phone Number _____

City _____ State ____ Zip _____ Fax _____

National State Association _____ Guest Referee Applications Accepted _____

City or Town of Tournament or Games: _____ Application Deadline _____

Dates of Tournament or Games: _____ Estimated Number of Teams _____

Tournament Director/Contact Person _____ Work Phone: _____

Street Address _____ Tournament Director/Contact Email Address: _____

City _____ State ____ Zip _____ Phone Number: _____

[illegible]

- ☐ **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
- ☐ **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 its applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization *Dan Vance VP Soccer* Date: _____

STATE ASSOCIATION OR AFFILIATE

KENTUCKY YOUTH SOCCER ASSOCIATION

Date:

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