



# US Youth Soccer

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 **Labor Day Friendlies** Website URL: www.seacoastunited.org

Hosting Organization Seacoast United Type of Tournament:  Select  Recreational  Select & Rec  
926.8444

Designate Official of Hosting Organization Cathy Costello Title Club Administrator Phone (603) x211 W

Address PO Box 779 Email Ccostello@seacoastunited.org Phone (603) 401-1439 H

City Hampton State NH Zip Code 03843 Phone (603) 926.8555 FAX

State Association or Affiliate NH Guest Referees Applications Accepted  Yes  No

Location of Tournament or Games Seacoast United- Outdoor Complex- Epping, NH **TEAM ENTRY DEADLINE:** Aug 20, 2010

Date(s) of Tournament or Games September 4-5 2010 Estimated # of Teams 48

Tournament or Games Director or Contact Person Kelly Kelly Phone (603) x206 W  
926.8444

Address PO Box 779 Email kkelly@seacoastunited.org Phone (978) 239-2192 H

City Hampton State NH Zip Code 03843 Phone (603) 926.8555 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- 9 8/1/ 01	S1- S3	x	x	12	4	60	6	<input type="checkbox"/>	3	275	<input type="checkbox"/>
U- 10 8/1/ 00	S1- S3	X	x	12	4	60	6	<input type="checkbox"/>	3	275	<input type="checkbox"/>
U- 11 8/1/ 99	S1- S3	X	x	14	4	60	8	<input type="checkbox"/>	3	5375	<input type="checkbox"/>
U- 12 8/1/ 98	S1- S3	X	x	14	4	60	8	<input type="checkbox"/>	3	375	<input type="checkbox"/>
U- 13 8/1/ 97	S1- S3	x	x	20	4	70	11	<input type="checkbox"/>	3	425	<input type="checkbox"/>
U- 14 8/1/ 96	S1- S3	x	x	20	4	70	11	<input type="checkbox"/>	3	425	<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 – US Youth Soccer Members and Affiliates only.

Team will be restricted to teams within the national state association  Teams will be invited from all US Youth State Associations/Affiliates only.

UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: US Club

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 all applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization Cathy Costello Date 8/17/2010

Note: For an Un-restricted tournament, NHSA will cover all USYSA teams that are entered with insurance. NHSA will not cover non-USYSA teams. Any non-USYSA must show proof of insurance to enter this tournament. A copy of the proof of insurance must be included with the "Post Tournament or Game Report", after the tournament.

(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE NEW Hampshire Soccer Assoc Date 8-24-10  
By [Signature] Title President NHSA



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