



US Youth Soccer/Kentucky Youth Soccer

APPLICATION TO HOST A TOURNAMENT OR GAMES



Name of Tournament or Games MCCSA 3v3 Website URL: www.tcsportzevents.com

Hosting Organization Murray-Calloway Co. Soccer Association Type of Tournament: ☐ Select ☐ Recreational ☒ Select&Rec

Designate Official of Hosting Organization Sally Bouley Title President Phone _____ W

Address 809 Broad Street Email sabouley@hotmail.com (270)293-6244 H

City Murray State KY Zip 42071 Fax _____

State Association or Affiliate Kentucky Youth Soccer Guest Referee Applications Accepted: ☒ Yes ☐ No

Location of Tournament or Games Murray **TEAM ENTRY DEADLINE: Jun 06, 2009**

Date(s) of Tournament or Games Jun 13 - Jun 14, 2009 Estimated # of Teams 100

Tournament or Games Director or Contact Person Mickey McCuiston Phone _____ W

Address 1213 Melrose Drive E-mail wmcuiston@tcsportz.com (270)873-2694 H

City Murray State KY Zip 42071 (480)287-8495 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
U10	8/1/1998	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$150	
U11	8/1/1997	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$150	
U12	8/1/1996	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$150	
U13	8/1/1995	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$175	
U14	8/1/1994	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$175	
U15	8/1/1993	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$175	
U16	8/1/1992	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$175	
U18	8/1/1990	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$175	
U6	8/1/2002	S1,S2,S3,S4,RT	X	X	6	6	20	3	X	3	\$150	
U7	8/1/2001	S1,S2,S3,S4,RT	X	X	6	6	20	3	X	3	\$150	
U8	8/1/2000	S1,S2,S3,S4,RT	X	X	6	6	20	3	X	3	\$150	
U9	8/1/1999	S1,S2,S3,S4,RT	X	X	6	6	24	3	X	3	\$150	

- ☐ **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 only.
- ☒ **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 all applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization _____ Date _____

APPROVAL (For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Kentucky Youth Soccer Association Date 4/28/2009



By  Title Executive Director

KENTUCKY YOUTH SOCCER - 443 S. ASHLAND AVENUE, SUITE 201, LEXINGTON, KY 40502

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.