



# 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 North Kingstown Father's Day Classic Website URL: \_\_\_\_\_

Hosting Organization North Kingstown Soccer Association Type of Tournament:  Select  Recreational  Select & Rec

Designate Official of Hosting Organization Mary Kate Mulligan Title President Phone (401) 2944516 W

Address 44 Juniper Dr Email mulligansfore@msn.com Phone (401) 2944516 H

City North Kingstown State RI Zip Code 2852 Phone (401) 2954313 FAX

State Association or Affiliate RI Guest Referees Applications Accepted  Yes  No

Location of Tournament or Games North Kingstown, RI **TEAM ENTRY DEADLINE:** May 1, 2008

Date(s) of Tournament or Games June 14-15, 2008 Estimated # of Teams 100

Tournament or Games Director or Contact Person Russ Dubuc Phone (774) 2031302 W

Address 53 Macintosh Lane Email rdubuc6789@cox.net Phone (401) 2949716 H

City Saunderstown State RI Zip Code 2874 Phone (401) 6674920 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
	8	10	12										
U- 8	8/1/	99	S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	30	4	<input checked="" type="checkbox"/>	3	225	<input type="checkbox"/>
U- 10	8/1/	97	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	6	<input checked="" type="checkbox"/>	3	275	<input type="checkbox"/>
U- 12	8/1/	95	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	50	8	<input checked="" type="checkbox"/>	3	325	<input type="checkbox"/>
U- 14	8/1/	93	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	50	11	<input checked="" type="checkbox"/>	3	350	<input type="checkbox"/>
U- 16	8/1/	91	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	50	11	<input checked="" type="checkbox"/>	3	350	<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"/>
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.

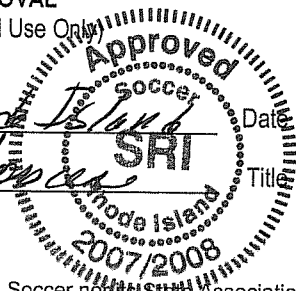
- RT RESTRICTED TOURNAMENT** - US Youth Soccer Members and Affiliates only.
- Team will be restricted to teams within the national state association  Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT** Other US Soccer Members as listed: \_\_\_\_\_
- 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 Mary Kate Mulligan, President Date 12/1/07

APPROVAL  
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Soccer Rhode Island Date Jan 31, 2008  
By Barbara Baber Title Administrator



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.