



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games 8th Annual Open Cup- Boys Website URL: www.premiersoccerservices.com

Hosting Organization Premier Soccer Services Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Scott Spencer Title President Phone 210 305-4821 W

Address 10194 Green Moss Dr N Email scott@premiersoccerservices.com Phone () _____ H

City Cordova State TN Zip Code 38018 Phone () _____ FAX

State Association or Affiliate AYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Decatur AL **TEAM ENTRY DEADLINE:** March 10

Date(s) of Tournament or Games April 13-14, 2019 Estimated # of Teams 100

Tournament or Games Director or Contact Person Scott Spencer Phone 210 3054821 W

Address 10194 Green Moss Dr N Email scott@premiersoccerservices.com () _____ H

City Cordova State TN 38018 Phone () _____ 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	1/1/ 10 S1-s4,rt, odp	x		12	5	50	7	X	3	495-565	<input type="checkbox"/>
U- 10	1/1/ 09 S1-s4,rt, odp	x		12	5	50	7	X	3	495-565	<input type="checkbox"/>
U- 11	1/1/ 08 S1-s4,rt, odp	x		16	5	50	9	X	3	525-595	<input type="checkbox"/>
U- 12	1/1/ 07 S1-s4,rt, odp	x		16	5	60	9	X	3	525-595	<input type="checkbox"/>
U- 13	1/1/ 06 S1-s4,rt, odp	x		22	5	70	11	X	3	625-695	<input type="checkbox"/>
U- 14	1/1/ 05 S1-s4,rt, odp	x		22	5	70	11	X	3	625-695	<input type="checkbox"/>
U- 15	1/1/ 04 S1-s4,rt, odp	x		22	5	70	11	X	3	625-695	<input type="checkbox"/>
U- 16	1/1/ 03 S1-s4,rt, odp	x		22	5	70	11	X	3	865-945	<input type="checkbox"/>
U- 17	1/1/ 02 S1-s4,rt, odp	x		22	5	70	11	X	3	865-945	<input type="checkbox"/>
U- 19	1/1/ 00 S1-s4,rt, odp	x		22	5	70	11	X	3	865-945	<input type="checkbox"/>

*List of types of teams and tournaments is on reverse side of this form.

- RT RESTRICTED TOURNAMENT --Open only to members of US Youth Soccer and its State Associations.
- Team will be restricted to teams within the state association Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT (Open to all Federation affiliated participants)
- International 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.

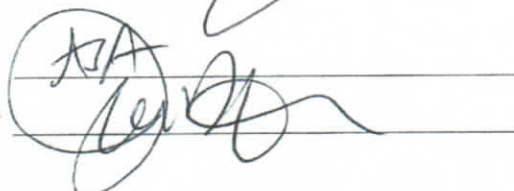
Signature of Designated Official of Hosting Organization



Date 2-19-19

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By 

Date 12/7/18

Title ED





Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games 8th Annual Open Cup- Girls Website URL: www.premiersoccerservices.com

Hosting Organization Premier Soccer Services Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Scott Spencer Title President Phone 210 305-4821 W

Address 10194 Green Moss Dr N Email scott@premiersoccerservices.com Phone () _____ H

City Cordova State TN Zip Code 38018 Phone () _____ FAX

State Association or Affiliate AYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Decatur AL **TEAM ENTRY DEADLINE:** March 5

Date(s) of Tournament or Games April 6-7, 2019 Estimated # of Teams 100

Tournament or Games Director or Contact Person Scott Spencer Phone 210 3054821 W

Address 10194 Green Moss Dr N Email scott@premiersoccerservices.com () _____ H

City Cordova State TN 38018 Phone () _____ 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	1/1/ 10 S1-s4,rt, odp		X	12	5	50	7	X	3	495-565	<input type="checkbox"/>
U- 10	1/1/ 09 S1-s4,rt, odp		x	12	5	50	7	X	3	495-565	<input type="checkbox"/>
U- 11	1/1/ 08 S1-s4,rt, odp		x	16	5	50	9	X	3	525-595	<input type="checkbox"/>
U- 12	1/1/ 07 S1-s4,rt, odp		x	16	5	60	9	X	3	525-595	<input type="checkbox"/>
U- 13	1/1/ 06 S1-s4,rt, odp		x	22	5	70	11	X	3	625-695	<input type="checkbox"/>
U- 14	1/1/ 05 S1-s4,rt, odp		x	22	5	70	11	X	3	625-695	<input type="checkbox"/>
U- 15	1/1/ 04 S1-s4,rt, odp		X	22	5	70	11	X	3	625-695	<input type="checkbox"/>
U- 16	1/1/ 03 S1-s4,rt, odp		X	22	5	70	11	X	3	865-945	<input type="checkbox"/>
U- 17	1/1/ 02 S1-s4,rt, odp		X	22	5	70	11	X	3	865-945	<input type="checkbox"/>
U- 19	1/1/ 00 S1-s4,rt, odp		X	22	5	70	11	X	3	865-945	<input type="checkbox"/>

*List of types of teams and tournaments is on reverse side of this form.

- RT RESTRICTED TOURNAMENT -Open only to members of US Youth Soccer and its State Associations.
- Team will be restricted to teams within the state association Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT (Open to all Federation affiliated participants)
- International 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 2-19-19

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE



Premier Soccer Services

By

Date

12/7/18

Title

1st Fed