



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 EMY CHALLENGE CUP Website URL: ENYSOCCER.COM
 Hosting Organization ENYUSA Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization M. SEGRITO / G. KNIGHT Title CO-CHAIRMAN Phone 516) 766-0849 W
 Address 167 NASSAU BLVD. Email diana@emysoccer.com Phone () _____ H
 City GARDEN CITY SOUTH State NY Zip Code 11530 Phone () _____ FAX
 State Association or Affiliate ENYUSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games VARIOUS LOCATIONS. TEAM ENTRY DEADLINE: FEB 1, 2022
 Date(s) of Tournament or Games MAR 12, 13, 19 20 APR. 9, 10 MAY 7, 8, 21 Estimated # of Teams 100
 Tournament or Games Director or Contact Person JUNE 4, 5 ENYUSA OFFICE Phone 516) 766-0849 W
 Address 167 NASSAU BLVD. Email diana@emysoccer.com Phone () _____ H
 City GARDEN CITY SOUTH State NY Zip Code 11530 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-10	51, 52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	50	7	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-11	51, 52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	60	9	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-12	52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	60	9	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-13	52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	70	11	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-14	52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	70	11	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-15	52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	80	11	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-16	52, 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	26	NONE	80	11	<input checked="" type="checkbox"/>	1	\$ 250	<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<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 - 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 Other US Soccer Members as listed: US Club.
- 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 applicable rules of the approving State Association or Affiliate.

Signature of Michael Segreto Designated Official of Hosting Organization

Michael Segreto

Date 1/3/2022

APPR 
 (For Official Use Only) STATE ASSOCIATION OR AFFILIATE

ENYUSA

Date 1/3/2022

By Diana Knight

Title office