



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 Rocky Point Festival Website URL: https://rockypointsoccerclub.gotsportsites.com/  
 Hosting Organization Rocky Point Youth Soccer Club Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Joe Camarda Title President Phone ( ) 631-942-9505 W  
 Address 6 Hawks Nest Rd Email rockypointsoccer@gmail.com Phone ( ) \_\_\_\_\_ H  
 City Stony Brook State NY Zip Code 11790 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate ENYYSA / LIJSL Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Frank J. Carasiti School **TEAM ENTRY DEADLINE: 7-7-2024**  
 Date(s) of Tournament or Games July 20, 2024 Estimated # of Teams 30 - 40  
 Tournament or Games Director or Contact Person Joe Camarda Phone ( ) 631-942-9505 W  
 Address 6 Hawks Nest Rd Email rockypointsoccer@gmail.com Phone ( ) \_\_\_\_\_ H  
 City Stony Brook State NY Zip Code 11790 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	1/1/1 LIJSL	<input type="checkbox"/>	<input type="checkbox"/>	15		55 Minutes	7	<input type="checkbox"/>	3	325.00	<input type="checkbox"/>
U- 10	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>	15		55 Minutes	7	<input type="checkbox"/>	3	325.00	<input type="checkbox"/>
U- 11	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>	15		55 Minutes	9	<input type="checkbox"/>	3	325.00	<input type="checkbox"/>
U- 12	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>	15		55 Minutes	9	<input type="checkbox"/>	3	325.00	<input type="checkbox"/>
U- 13	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>	22		55 Minutes	11	<input type="checkbox"/>	3	375.00	<input type="checkbox"/>
U- 14	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>	22		55 Minutes	11	<input type="checkbox"/>	3	375.00	<input type="checkbox"/>
U- 15	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>	22		55 Minutes	11	<input type="checkbox"/>	3	375.00	<input type="checkbox"/>
U- 18	1/1/1 LIJSL	<input type="checkbox"/>	<input type="checkbox"/>	22		55 Minutes	11	<input type="checkbox"/>	3	375.00	<input type="checkbox"/>
U-	1/1/1	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	1/1/1	<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 - 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: \_\_\_\_\_

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 3-26-24

**APPROVAL**

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE Long Island Junior Soccer League

Date 03/26/2024

By Sonia Kelly

Title Operations Manager



*[Handwritten signature]*  
3-27-24