



A Proud Member of US Soccer
Affiliated with the Federation Internationale de Football Association

Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Back to the Beach Soccer Classic Website URL SIYSL.org

Hosting Organization Staten Island Soccer League/ NYC Parks Type of Tournament Select Recreational Select & Rec

Designate Official of Hosting Organization Rich Nellis Title President Phone () 201-699-6497 W

Address 15 Dyson St Email richard.nellis@siysl.org Phone () 917-596-2539 H

City Staten Island State NY Zip Code 10304 Phone () _____ FAX

State Association or Affiliate Eastern New York Youth Guest Referee Applications Accepted Yes No

Location of Tournament or Games Midland Beach Staten Island **TEAM ENTRY DEADLINE: 5/27/23**

Date(s) of Tournament or Games Director or Contact Person June 22/23 rain date 29/30 Rich Nellis Phone () 917-596-2539 W

Address Midland Beach Fr Capadano Blvd between Hunter and Greeley Aves Email richard.nellis@siysl.org Phone () _____ H

City Staten Island NY State NY Zip Code 10306 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- 8 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20 mins	5	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 9 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20 mins	5	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 10 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 11 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 12 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 13 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 14 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 15 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 16 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<input type="checkbox"/>
U- 18 1/1/	RT, S2,S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Max 10	2	20-25 mins	4	<input checked="" type="checkbox"/>	4	100	<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

NYC PAL Soccer

Other US Soccer Members as listed: _____

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 appropriate State Association or Affiliate.

Signature of Designated Official of Hosting Organization _____

DATE 04/25/24

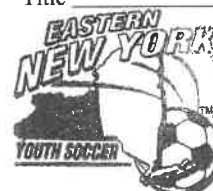
APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE _____

By _____

Date _____

Title _____



4-26-24

[Handwritten Signature]