



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 CJSL Girls Pre-Season Tournament Website URL: https://www.cjslsoccer.com/
 Hosting Organization CJSL Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization David Gordon Title Games Chairman Phone () 829-2544 W
 Address 378 New York Ave Email davidg@cjslsoccer.com Phone () _____ H
 City Brooklyn State NY Zip Code 11213 Phone () _____ FAX
 State Association or Affiliate ENY Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Parade Ground **TEAM ENTRY DEADLINE: August 1, 2024**
 Date(s) of Tournament or Games August 25th, 2024 Estimated # of Teams 40
 Tournament or Games Director or Contact Person David Gordon Phone () _____ W
 Address 378 New York Ave Email davidg@cjslsoccer.com Phone () _____ H
 City Brooklyn State NY Zip Code 11213 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/	Travel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	25	7v7	<input type="checkbox"/>	3	200	<input type="checkbox"/>
U- 10 1/1/	Travel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	25	7v7	<input type="checkbox"/>	3	200	<input type="checkbox"/>
U- 11 1/1/	Travel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	30	9v9	<input type="checkbox"/>	3	200	<input type="checkbox"/>
U- 12 1/1/	Travel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	30	9v9	<input type="checkbox"/>	3	200	<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 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: _____
- 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 David Gordon Date 6/21/2024

APPROVAL

(For Official Use Only)STATE ASSOCIATION OR AFFILIATE ENY

By _____

