



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 John Jay FC Labor Day Tournament Website URL: johnjayfc.com
 Hosting Organization John Jay FC Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Chris Rietsch Title President Phone () 914-384-1382 W
 Address PO Box 455 Email jjfcpresident@gmail.com Phone () _____ H
 City South Salem State NY Zip Code 10590 Phone () _____ FAX
 State Association or Affiliate ENYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Onatru Park or Meadowpond ~~ES&C~~ ΣCM **TEAM ENTRY DEADLINE:** 8/31/2024
 Date(s) of Tournament or Games 8/31-9/1 (9/2 Rain Date) Estimated # of Teams 90-100
 Tournament or Games Director or Contact Person Chris Rietsch Phone () 914-384-1382 W
 Address 18 Branch St. Email jjfcpresident@gmail.com Phone () _____ H
 City Goldens Bridge State NY Zip Code 10526 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/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	:25	7	<input checked="" type="checkbox"/>	3	475	<input type="checkbox"/>
U- 9	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	:30	7	<input checked="" type="checkbox"/>	3	475	<input type="checkbox"/>
U- 10	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	:30	7	<input checked="" type="checkbox"/>	3	475	<input type="checkbox"/>
U- 11	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	:40	9	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 12	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	:40	9	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 13	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20	3	:50	11	<input checked="" type="checkbox"/>	3	625	<input type="checkbox"/>
U- 14	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20	3	:50	11	<input checked="" type="checkbox"/>	3	625	<input type="checkbox"/>
U- 15	1/1/ Select	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20	3	:50	11	<input checked="" type="checkbox"/>	3	625	<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

CHRIS RIETSCH

Date 7/2/24

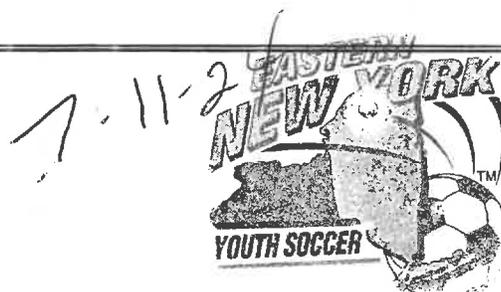
APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By _____

Date _____

Title _____



See app'd via email 7/10/24