



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

/mtsinaisoccer.com

Name of Tournament or Games SVSL Summer Series Tournament Website URL: ETASoccerPark.COM

Hosting Organization ETA Soccer Park / Mount Sinai SC Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Nick Gordon (Nickita) Title President Phone (917) 830-2103 W

Address 132 Christian Ave Email info@etasoccerpark.com Phone () _____ H

City Stony Brook State NY Zip Code 11790 Phone () _____ FAX

State Association or Affiliate LITSL Guest Referees Applications Accepted Yes No

Location of Tournament or Games ETA Soccer Park TEAM ENTRY DEADLINE: June 14

Date(s) of Tournament or Games 6/28, 7/5, 12, 19, 26, 8/2, 9, 16, 23 Estimated # of Teams 16 per event

Tournament or Games Director or Contact Person Nick Gordon Phone () _____ W

Address 132 Christian Ave Email info@etasoccerpark.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	1/1/2016 Select and Rec	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	30 mins	6	<input checked="" type="checkbox"/>	3	340	<input type="checkbox"/>
U-10	1/1/2015 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	340	<input type="checkbox"/>
U-11	1/1/2014 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	340	<input type="checkbox"/>
U-12	1/1/2013 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	340	<input type="checkbox"/>
U-13	1/1/2012 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	40 mins	6	<input checked="" type="checkbox"/>	3	395	<input type="checkbox"/>
U-14	1/1/2011 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	395	<input type="checkbox"/>
U-15	1/1/2010 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	395	<input type="checkbox"/>
U-16	1/1/2009 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	395	<input type="checkbox"/>
U-17	1/1/2008 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	395	<input type="checkbox"/>
U-19	1/1/2006 " "	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	1	" "	6	<input checked="" type="checkbox"/>	3	395	<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

Date 3/31/25

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Long Island Junior Soccer League Date 4/13/25

By

Title

Operations Manager



4-18-25