



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 OUSC Bob Schrager Memorial Cup- Website URL: www.ousc.com  
 Hosting Organization Oceanside United Soccer Club Type of Tournament: ☐ Select ☐ Recreational ☒ Select & Rec  
 Designate Official of Hosting Organization Graeme Hepburn/ Michael Soto Title Club President/Vice President Phone (917) 674-7850 W  
 Address 44 Hawthorne St. Email \_\_\_\_\_ Phone ( ) \_\_\_\_\_ H  
 City Oceanside Lynbrook State NY Zip Code 11563 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate ENYSA Guest Referees Applications Accepted ☒ Yes ☐ No  
 Location of Tournament or Games Oceanside Park/Boardman/EMSC Fields TEAM ENTRY DEADLINE:  
 Date(s) of Tournament or Games 8/30-8/31 Estimated # of Teams 150-200  
 Tournament or Games Director or Contact Person Michael Soto Phone ( ) 516-633-1587 W  
 Address 2890 Clarendon Rd. Email msotosoccer@gmail.com Phone ( ) \_\_\_\_\_ H  
 City Oceanside NY State NY Zip Code 11572 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/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	\$750	<input type="checkbox"/>
U- 10 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	\$750	<input type="checkbox"/>
U- 11 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	50	9	<input checked="" type="checkbox"/>	3	\$790	<input type="checkbox"/>
U- 12 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	50	9	<input checked="" type="checkbox"/>	3	\$790	<input type="checkbox"/>
U- 13 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	50	11	<input checked="" type="checkbox"/>	3	\$840	<input type="checkbox"/>
U- 14 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	50	11	<input checked="" type="checkbox"/>	3	\$840	<input type="checkbox"/>
U- 15 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	50	11	<input checked="" type="checkbox"/>	3	\$840	<input type="checkbox"/>
U- 16 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	50	11	<input checked="" type="checkbox"/>	3	\$840	<input type="checkbox"/>
U- 17 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	50	11	<input checked="" type="checkbox"/>	3	\$840	<input type="checkbox"/>
U- 18 1/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	50	11	<input checked="" type="checkbox"/>	3	\$840	<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: All USSF Affiliates  
☐ 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 6/25

### APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By

Date

Title



20-25