



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

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C.D.Y.S.L.
19 Aviation Road
Suite 9
Albany, NY 12205-1142

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games	RUSC Kickoff Classic	Website URL:	Https://www.ruscny.org/kickoff-classic			
Hosting Organization	Rotterdam United Soccer Club	Type of Tournament:	<input type="checkbox"/> Select	<input type="checkbox"/> Recreational	<input checked="" type="checkbox"/> Select & Rec	
Designate Official of Hosting Organization	Scott Byrnes	Title	Vice President		Phone () _____ W	
Address	Tom Green	Email	rotterdamsoccer@gmail.com		Phone () _____ H	
City	Rotterdam	State	NY	Zip Code	12306 Phone () _____ FAX	
State Association or Affiliate	Eastern NY Youth Soccer Association	Guest Referees Applications Accepted <input type="checkbox"/> Yes <input type="checkbox"/> No				
Location of Tournament or Games	100 Princeton rd	TEAM ENTRY DEADLINE: 4/12/2026				
Date(s) of Tournament or Games	4/24, 4/25, 4/26	Estimated # of Teams 100				
Tournament or Games Director or Contact Person	Scott Byrnes	Phone () 518-339-6224 W				
Address	Po Box 6021, 93 West Campbell Rd	Email	Scottbyrnes@live.com Phone () _____ H			
City	Albany	State	NY	Zip Code	12306 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/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	8	<input type="checkbox"/>	4	350	<input type="checkbox"/>
U- 09	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	7	<input type="checkbox"/>	4	375	<input type="checkbox"/>
U- 10	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	7	<input type="checkbox"/>	4	375	<input type="checkbox"/>
U- 12	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	25	9	<input type="checkbox"/>	4	425	<input type="checkbox"/>
U- 14	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input type="checkbox"/>	4	450	<input type="checkbox"/>
U- 16	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	34	11	<input type="checkbox"/>	4	500	<input type="checkbox"/>
U- 17	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	34	11	<input type="checkbox"/>	4	500	<input type="checkbox"/>
U- 18	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	34	11	<input type="checkbox"/>	4	500	<input type="checkbox"/>
U- 19	1/1/		S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	34	11	<input type="checkbox"/>	4	500	<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

Scott Byrnes

Date 12/13/2025

APPROVAL

(For Official Use Only) STATE
ASSOCIATION OR AFFILIATE

By _____



[Signature]
Date _____
Title _____

1-8-26