Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games **Long Island Classic**   Website URL: **longislandclassic.com**

Hosting Organization **Sachem/Smithton/West Islip**   Type of Tournament: ☐ Select ☐   Recreational ☐   ☑ Select & Rec

Designate Official of Hosting Organization **Mike Lombardi**   Title **President**   Phone ( ) **631-648-8877** W

Address **5 PO Box**   Email **president@westislipsoccer.com**   Phone ( ) _____ H

City **Sachem/Smithtown/West Islip**   State **NY**   Zip Code **11795**   Phone ( ) _____ FAX

State Association or Affiliate **ENYS**   Guest Referees Applications Accepted ☐ Yes ☑ No

Location of Tournament or Games **Sachem/Smithtown/West Islip**   TEAM ENTRY DEADLINE: **1 month before start**

Date(s) of Tournament or Games **Aug 29-30 2026**   Estimated # of Teams **225**

Tournament or Games Director or Contact Person **Rick deVres**   Phone ( ) **631-804-2885** W

Address **5 PO Box**   Email **director@longislandsoccerclassic.com**   Phone ( ) _____ H

City **West Islip**   State **NY**   Zip Code **11795**   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/	Unrestricted	☑	☑	12	3	2x20Min		☑	3		☐
U-	9	1/1/	Unrestricted	☑	☑	14	3	2x25min		☑	4		☐
U-	10	1/1/	Unrestricted	☑	☑	14	3	2x25min		☑	4		☐
U-	11	1/1/	Unrestricted	☑	☑	18	3	2x25min		☑	4		☐
U-	12	1/1/	Unrestricted	☑	☑	18	3	2x25min		☑	4		☐
U-	13	1/1/		☐	☐					☐			☐
U-	to	1/1/		☐	☐					☐			☐
U-	19	1/1/	Unrestricted	☑	☑	22	3	2x25min		☑	4		☐
U-		1/1/		☐	☐					☐			☐
U-		1/1/		☐	☐					☐			☐

*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   *Michael Lombardi*   Date 3/5/26

APPROVAL

(For Official Use Only)STATE ASSOCIATION OR AFFILIATE

By _S. Hernandy_

Long Island Junior Soccer League
701-9 Koehler Avenue
Ronkonkoma, NY 11779

Date 3/12/26

Title Prog/Event Manager

EASTERN NEW YORK YOUTH SOCCER

3-13-26