



Nancy Stangle

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

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

Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Mad Dog Mania Showcase Tournament Website URL: maddogmania.com

Hosting Organization Ballston Spa Soccer Club Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Andrew Werner Title President Phone () 5184509502 W

Address PO Box 2242 Email rob.szmarz@gmail.com Phone () _____ H

City Malta State NY Zip Code 12020 Phone () _____ FAX

State Association or Affiliate Eastern NY Guest Referees Applications Accepted Yes No

Location of Tournament or Games Gavin Park Saratoga, NY **TEAM ENTRY DEADLINE:** May 11th, 2026

Date(s) of Tournament or Games June 13 & 14, 2026 Estimated # of Teams 95

Tournament or Games Director or Contact Person Nancy Stangle Phone () 5187451462 W

Address 3 Iroquois Drive Email nstangle@maddogmania.com Phone () 5187451462 H

City Queensbury State NY Zip Code 12804 Phone () 5187451462 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- 15 1/1/ 11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1,475	<input type="checkbox"/>
U- 16 1/1/ 10	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1,475	<input type="checkbox"/>
U- 17 1/1/ 09	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1,475	<input type="checkbox"/>
U- 18 1/1/ 08	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1,475	<input type="checkbox"/>
U- 19 1/1/ 07	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1,475	<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"/>
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"/>
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: US Club, Super Y
- 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 Andrew Werner Date 3/12/2026

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By _____



3-25-26

Handwritten signature