

Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Tiger Tune Up Website URL: WPYS.ORG

Hosting Organization White Plains Youth Soccer Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Alan Himmelstein Title President Phone 917 2091279 W

Address 24 Northdale Road Email AHimmelstein@osg.com Phone 914 6831037 H

City White Plains State NY Zip Code 10605 Phone 212 2511180 FAX

State Association or Affiliate ENYUSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games George Washington School and WPHS, White Plains NY **TEAM ENTRY DEADLINE:** September 4, 2010

Date(s) of Tournament or Games September 11, 2010 Estimated # of Teams 40

Tournament or Games Director or Contact Person George Caceres Phone 914 8371567 W

Address 150 Lake Street Email georgecaceres@hotmail.com Phone 914 8317192 H

City White Plains State NY Zip Code 10604 Phone 212 2511180 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 8/1/ 01	S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	8	<input checked="" type="checkbox"/>	3	275.00	<input type="checkbox"/>
U- 10 8/1/ 00	S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	8	<input checked="" type="checkbox"/>	3	275.00	<input type="checkbox"/>
U- 11 8/1/ 99	S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	25	9	<input checked="" type="checkbox"/>	3	275.00	<input type="checkbox"/>
U- 12 8/1/ 98	S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	25	11	<input checked="" type="checkbox"/>	3	275.00	<input type="checkbox"/>
U- 13 8/1/ 97	S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	25	11	<input checked="" type="checkbox"/>	3	275.00	<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>

Joe D'Angenio
WYSL REGISTRAR

*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
- International
- Teams as listed: _____

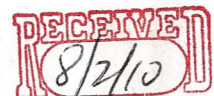
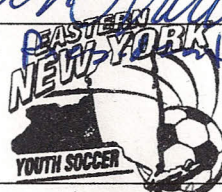
The Hosting Organization agrees to be bound by and comply with the terms contained in the TOURNAMENT AND GAMES HOSTING AGREEMENT and all applicable rules of the approving State Association or Affiliate.

Signature of Designated Official of Hosting Organization _____

Date 7/1/10

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE



By Maura Knight

Date _____
Title office