



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 2022 GCCSA Spring ~~Star~~ Explosion Website URL: www.gccsasoccer.com
 Hosting Organization Greater Cleveland County Soccer Association Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Shannon Allen Title Tournament Chair Phone (✓) 704 300 1599 W
 Address 825 McBrayer Homestead Road Email SAllen6@gardner-webb.edu Phone () _____ H
 City Shelby State NC Zip Code 28152 Phone () _____ FAX
 State Association or Affiliate NCYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Hanna Park Shelby, NC TEAM ENTRY DEADLINE: March 11, 2022
 Date(s) of Tournament or Games March 26-27, 2022 Estimated # of Teams _____
 Tournament or Games Director or Contact Person Shannon Allen Phone (✓) 704 300 1599 W
 Address 825 McBrayer Homestead Road Email tournamentchair@gccsasoccer.com Phone () _____ H
 City Shelby State NC Zip Code 28152 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	
10u	1/1 13	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	2x30	7	<input checked="" type="checkbox"/>	3	450.00	<input type="checkbox"/>
11u	1/1 12	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	2x30	9	<input checked="" type="checkbox"/>	3	450.00	<input type="checkbox"/>
12u	1/1 11	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	2x30	9	<input checked="" type="checkbox"/>	3	450.00	<input type="checkbox"/>
13u	1/1 10	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x35	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
14u	1/1 09	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x35	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
15u	1/1 08	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x40	11	<input checked="" type="checkbox"/>	3	650.00	<input type="checkbox"/>
16u	1/1 07	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x40	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
17u	1/1 06	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x40	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
18u	1/1 05	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x40	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>
19u	1/1 04	53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	2x40	11	<input checked="" type="checkbox"/>	3	550.00	<input type="checkbox"/>

** All Championship matches with 10u-19u will be two 30-minute halves**
 *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: _____
 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

Shannon Allen

Date 11/30/21

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

NCYSA



Date 12/6/2021

By

[Signature]

Date

Title

VP Tournaments