



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

Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

BOYS

Name of Tournament or Games SOUTHEAST SOCCER SHOWCASE Website URL: WWW.NCFUSION.ORG
 Hosting Organization NC FUSION Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization GARY GARTNER Title TOURNEY DIR Phone () 336-554- W
 Address 428 TWINS WAY Email GGARTNER@NCFUSION.ORG Phone () 3630 H
 City BERMUDA RUN State NC Zip Code 27006 Phone () _____ FAX
 State Association or Affiliate NCYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games BRYAN PARK TEAM ENTRY DEADLINE: JANUARY 27, 2023
 Date(s) of Tournament or Games FEB 24-26, 2023 Estimated # of Teams 200
 Tournament or Games Director or Contact Person SAME AS ABOVE Phone () _____ W
 Address _____ Email _____ Phone () _____ H
 City _____ State _____ Zip Code _____ 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-11		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-12		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-11	12 RT S1 S2 S3 SA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	650	<input type="checkbox"/>
U-12	11 RT S1 S2 S3 SA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	650	<input type="checkbox"/>
U-13	10 RT S1 S2 S3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	750	<input type="checkbox"/>
U-14	09 RT S1 S2 S3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	750	<input type="checkbox"/>
U-15	08 RT S1 S2 S3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	*70-80	11	<input checked="" type="checkbox"/>	2-3	700/850	<input type="checkbox"/>
U-16	07 RT S1 S2 S3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	700/850	<input type="checkbox"/>
U-17	06 RT S1 S2 S3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	700/850	<input type="checkbox"/>
U-19	05 RT S1 S2 S3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	700/850	<input type="checkbox"/>

ALL CHAMPIONSHIP GAMES ARE 60 MINUTE MATCHES FOR 11U-19U | Two 30 MIN 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: _____
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 [Signature] Date 6-4-22

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE NCYSA **APPROVED** Date 10-26-2022
 By [Signature] Title VP Tournaments

*15U game duration depends on division team selects - tournament or showcase