



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

Please Type or Print Clearly - Do Not Staple

Amended 3-4-24
 USSSA added as accepted member
 to apply

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Foothills Classic Website URL: www.cvysa.org
 Hosting Organization CVYSA Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Brian Hefner Title Club President Phone () 828-228-9044 W
 Address PO Box 2115 Email hefner493@gmail.com Phone () _____ H
 City Hickory State NC Zip Code 28602 Phone () _____ FAX
 State Association or Affiliate NCYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games PEPSI/NEIL CLARK/HICKORY HS/ NORTH VIEW TEAM ENTRY DEADLINE: APRIL 5, 2024
 Date(s) of Tournament or Games MAY 4 & 5, 2024 Estimated # of Teams 100
 Tournament or Games Director or Contact Person Myron King Phone () 309-807-7870 W
 Address PO Box 2115 Email doc@cvysa.org Phone () _____ H
 City Hickory State NC Zip Code 28602 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/ 16 SA,S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12 10	3	50	7	<input checked="" type="checkbox"/>	3	\$400	<input type="checkbox"/>
U- 9	1/1/ 15 SA,S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input checked="" type="checkbox"/>	3	\$400	<input type="checkbox"/>
U- 10	1/1/ 14 SA,S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input checked="" type="checkbox"/>	3	\$400	<input type="checkbox"/>
U- 11	1/1/ 13 S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	\$610	<input type="checkbox"/>
U- 12	1/1/ 12 S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	\$610	<input type="checkbox"/>
U- 13	1/1/ 11 S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	\$650	<input type="checkbox"/>
U- 14	1/1/ 10 S2,S3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	\$650	<input type="checkbox"/>
U- 15	1/1/ 09 S2,S3,RT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U- 16	1/1/ 08 S2,S3,RT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U- 17	1/1/ 07 S2,S3,RT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	\$700	<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, AYSO, USSSA
 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 9/13/23

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

NCYSA
 By Susanne Conlon



3/4/24 amended
 Date 10/9/23
 Title VP Tournaments