



Amended 8-8-24
- Removed 15U-19U BOYS
- Added 15U-19U GIRLS



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 Explosion Cup Website URL: https://soccer.sincsports.com/details.aspx?tid=WILSON

Hosting Organization WYSA Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Richard Frazier Title Tournament Director Phone (252) 296-3360 W

Address PO Box 3112 Email wysajoymosley@gmail.com Phone) 205-2862 H

City Wilson State NC Zip Code 27895 Phone () _____ FAX

State Association or Affiliate Wilson Youth Soccer Guest Referees Applications Accepted Yes No

Location of Tournament or Games Gillette Soccer Complex TEAM ENTRY DEADLINE: September 19th 2024

Date(s) of Tournament or Games September 28th & 29th 2024 Estimated # of Teams 100

Tournament or Games Director or Contact Person Richard Frazier Phone (252) 296-3360 W

Address PO Box 3112 Email rfrazier@wilsonnc.org Phone (252) 205-2862 H

City Wilson State NC Zip Code 27895 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 10 15	S3, SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	2X25	7	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U 11 14	S2, SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	4	2X30	9	<input checked="" type="checkbox"/>	3	\$600	<input type="checkbox"/>
U 12 13	S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	4	2X30	9	<input checked="" type="checkbox"/>	3	\$600	<input type="checkbox"/>
U 13 12	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	2X35	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U 14 11	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	2X35	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U 15 10	S1, S2, S3		<input checked="" type="checkbox"/>	22	4	2X35	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U 16 09	S1, S2, S3		<input checked="" type="checkbox"/>	22	4	2X40	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U 17 08	S1, S2, S3		<input checked="" type="checkbox"/>	22	4	2X40	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U 18 07	S1, S2, S3		<input checked="" type="checkbox"/>	22	4	2X40	11	<input checked="" type="checkbox"/>	3	\$700	<input type="checkbox"/>
U 19 06	S1, S2, S3		<input checked="" type="checkbox"/>	22	4	2X40	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 (Open to all Federation affiliated participants)
- 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 President of Hosting Organization [Signature] Date 6-5-24

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

NCYSA



Date 6-19-24 Amended 8-8-24

By Susanne Conlon Title VP Tournaments