



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

Name of Tournament or Games	Impact FC Crossroads Classic	Website URL:	https://soccer.sincsports.com/TTContent.aspx?tid=1CRDCC&tab=1		
Hosting Organization	Impact FC	Type of Tournament:	<input checked="" type="checkbox"/> Select	<input type="checkbox"/> Recreational	<input checked="" type="checkbox"/> Select & Rec
Designate Official of Hosting Organization	Craig Hollis	Title	Executive Director		
Address	PO BOX 332	Email	director@impactfcnc.com		
City	Statesville	State	NC	Zip Code	28687
State Association or Affiliate	NCYSA				
Location of Tournament or Games	Statesville, Mooresville				
Date(s) of Tournament or Games	May 16th & 17th, 2026				
Tournament or Games Director or Contact Person	Craig Hollis/ Marty Haneline				
Address	PO BOX 332	Email	ifccrossroads@gmail.com		
City	Statesville	State	NC	Zip Code	28687
Guest Referees Applications Accepted <input type="checkbox"/> Yes <input type="checkbox"/> No					
TEAM ENTRY DEADLINE: April 17th, 2026					
Estimated # of Teams 70-150					
Phone ()	980-549-0388				
Phone ()	H				
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-	1-8	1/1/ '18-'19	RT, SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	5	48	7	<input type="checkbox"/>	3	\$460/\$510
U-	9	1/1/ '17	RT, SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	48	7	<input type="checkbox"/>	3	\$600/\$650
U-	10	1/1/ '16	S3, RT, SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	48	7	<input type="checkbox"/>	3	\$600/\$650
U-	11	1/1/ '15	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input type="checkbox"/>	3	\$675/\$725
U-	12	1/1/ '14	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input type="checkbox"/>	3	\$675/\$725
U-	13	1/1/ '13	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input type="checkbox"/>	3	\$725/\$775
U-	14	1/1/ '12	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input type="checkbox"/>	3	\$725/\$775
U-	15	1/1/ '11	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input type="checkbox"/>	3	\$725/\$775
U-	16	1/1/ '10	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input type="checkbox"/>	3	\$725/\$775
U-	17-19	1/1/ '07-'09	S1,S2,S3, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input type="checkbox"/>	3	\$775/\$825

*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

Craig Hollis

Date **12/1/25**
complete 1-11-26

APPROVAL

(For Official Use Only) STATE
ASSOCIATION OR AFFILIATE **NCYSA**

By **WAT**



Date **1-15-26**

Title **NCYSA Tournaments**