



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 Paradize Halloween Cup Website URL: https://www.soccerparadize.com/tournament
 Hosting Organization Sportsparadize Soccer Academy Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Malcolm Alexis Title Director Phone () 305-610-9619 W
 Address 4801 W Colonial DR Email soccerparadize@yahoo.com Phone () _____ H
 City Orlando, State FL Zip Code 32808 Phone () _____ FAX
 State Association or Affiliate FYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games North Lake Community Park **TEAM ENTRY DEADLINE:** October 15th, 2023
 Date(s) of Tournament or Games October 28-29, 2023 Estimated # of Teams 80
 Tournament or Games Director or Contact Person Malcolm Alexis Phone () 305-610-9619 W
 Address 4801 WS Colonial Dr Email soccerparadize@yahoo.com Phone () _____ H
 City Orlando, State FL Zip Code 32808 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- 9 11/1 2015	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	50	7	<input checked="" type="checkbox"/>	3	599	<input type="checkbox"/>
U- 10 11/1 2014	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	50	7	<input checked="" type="checkbox"/>	3	599	<input type="checkbox"/>
U- 11 11/1 2013	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	60	9	<input checked="" type="checkbox"/>	3	599	<input type="checkbox"/>
U- 12 11/1 2012	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	60	9	<input checked="" type="checkbox"/>	3	599	<input type="checkbox"/>
U- 13 11/1 2011	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	699	<input type="checkbox"/>
U- 14 11/1 2010	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	699	<input type="checkbox"/>
U- 15 11/1 2009	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	699	<input type="checkbox"/>
U- 16 11/1 2008	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	699	<input type="checkbox"/>
U- 17 11/1 2007	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	699	<input type="checkbox"/>
U- 18/19 11/1 2005	S1 - S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	699	<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: All USSF Affiliates: USYS, US Club, USSSA, SAY, AYSO
 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

[Handwritten Signature]

Date 9/12/2023

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

FYSA

Date 9/12/23



By Ashley Ellison

Title DPS & Office Admin

APPROVED