



US Youth Soccer

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 2017 Colorado Storm Spring Cup 1 Website URL: www.coloradostorm.com

Hosting Organization Colorado Storm Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Dave Dir Title President Phone (3) 799-0151 W

Address 7002 South Revere PKWY #60 Email ddir@coloradostorm.com Phone () _____ H

City Centennial State Co Zip Code 80112 Phone () _____ FAX

State Association or Affiliate Colorado Guest Referees Applications Accepted Yes No

Location of Tournament or Games Centennial, Castle Rock, Northglenn, Denver TEAM ENTRY DEADLINE: Feb 10, 2017

Date(s) of Tournament or Games March 3-5, 2017 Estimated # of Teams 200

Tournament or Games Director or Contact Person Said Mossavian Phone (7) 333-7243 W

Address 7002 South Revere PKWY #60 Email smossavian@coloradostorm.com Phone () _____ H

City Centennial State Co Zip Code 80112 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- 13 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 18 | 5 | 60 | 11 | <input checked="" type="checkbox"/> | 3 | \$575.00 | <input type="checkbox"/> |
| U- 14 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 18 | 5 | 60 | 11 | <input checked="" type="checkbox"/> | 3 | \$575.00 | <input type="checkbox"/> |
| U- 15 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | 5 | 70 | 11 | <input checked="" type="checkbox"/> | 3 | \$600.00 | <input type="checkbox"/> |
| U- 16 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 22 | 5 | 70 | 11 | <input checked="" type="checkbox"/> | 3 | \$600.00 | <input type="checkbox"/> |
| U- 17 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 22 | 5 | 80 | 11 | <input checked="" type="checkbox"/> | 3 | \$625.00 | <input type="checkbox"/> |
| U- 18 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 22 | 5 | 80 | 11 | <input checked="" type="checkbox"/> | 3 | \$625.00 | <input type="checkbox"/> |
| U- 19 8/1/1 | S1 S2 S3 S4 RT | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 22 | 5 | 80 | 11 | <input checked="" type="checkbox"/> | 3 | \$625.00 | <input type="checkbox"/> |
| U- 8/1/1 | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/1 | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/1 | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |

*List of types of teams and tournaments is on reverse side of this form.

- RT RESTRICTED TOURNAMENT - US Youth Soccer Members and Affiliates only.
- Team will be restricted to teams within the national state association Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: _____
- Foreign 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 _____

APPROVAL (For Official Use Only)

STATE ASSOCIATION OR AFFILIATE _____ Date 12-14-16

By [Signature] Title CEO

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.

12/6/2016