



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 Portsmouth Invitational Soccer Tournament Website URL: www.pysa.com/tournament

Hosting Organization Portsmouth Youth Soccer Association Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Carlos Williams Title President Phone (401) 408-3073 W

Address P.O. Box 428 Email piratespres@pysa.com Phone () _____ H

City Portsmouth State RI Zip Code 02871 Phone () _____ FAX

State Association or Affiliate Soccer Rhode Island Guest Referees Applications Accepted Yes No

Location of Tournament or Games Portsmouth, RI **TEAM ENTRY DEADLINE:** May 31, 2017

Date(s) of Tournament or Games June 16, 17 and 18, 2017 Estimated # of Teams 120

Tournament or Games Director or Contact Person Kristina Morgan Phone (401) 862-5360 W

Address P.O. Box 428 Email tournament@pysa.com Phone () _____ H

City Portsmouth State RI Zip Code 02871 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 8/1 10	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50 mins	5	<input checked="" type="checkbox"/>	4	325	<input type="checkbox"/>
U- 10 8/1 8	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50 mins	6	<input checked="" type="checkbox"/>	4	350	<input type="checkbox"/>
U- 12 8/1 6	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	50 mins	8	<input checked="" type="checkbox"/>	4	400	<input type="checkbox"/>
U- 14 8/1 4	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	50 mins	11	<input checked="" type="checkbox"/>	4	450	<input type="checkbox"/>
U- 16 8/1 2	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	50 mins	11	<input checked="" type="checkbox"/>	4	450	<input type="checkbox"/>
U- 8/1		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 8/1		<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 Carlos M. Williams Date 1/13/2017

APPROVAL
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Soccer Rhode Island Date March 15, 2017

By Barbara Labrosse Title Administrator



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.