



Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Circle City Labor Day Classic Website URL: www.fcpride.org
 Hosting Organization FC Pride Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Brent Paulson Title Director of Operations Phone (317) 432-4844 W
 Address 9801 Fall Creek Road #409 Email Bep19@sbcglobal.net Phone (317) 432-4844 H
 City Indianapolis State IN Zip Code 46256 Phone () _____ FAX _____
 State Association or Affiliate Indiana Youth Soccer Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Indianapolis, IN TEAM ENTRY DEADLINE: July 15, 2010
 Date(s) of Tournament or Games 9/4-9/6 2010 Estimated # of Teams 200
 Tournament or Games Director or Contact Person Brent Paulson Phone (317) 432-4844 W
 Address 9801 Fall Creek Road #409 Email Bep19@sbcglobal.net Phone () _____ H
 City Indianapolis State IN Zip Code 46256 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 8/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50	6	<input type="checkbox"/>	4	475	<input type="checkbox"/>
U- 10 8/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50	6	<input type="checkbox"/>	4	475	<input type="checkbox"/>
U- 11 8/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	60	8	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U- 12 8/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	60	8	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U- 13 8/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	60	11	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 14 8/1/	S1-S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	60	11	<input checked="" type="checkbox"/>	3	600	<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"/>

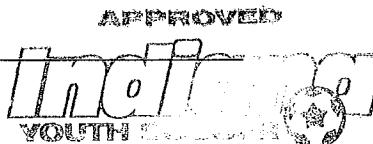
*List of types of teams and tournaments is on reverse side of this form.

- RT RESTRICTED TOURNAMENT –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: US CLUB SOCCER
 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

Brent E Paulson



Date 10/27/09

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Indiana
 By Sarah Cantwell

Date 12-1-09

Title Dir Member Services