



A Proud Member of US Soccer

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APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Columbia County Spring Shootout Website URL: www.soccer.sinesports.com/TTCcontent.aspx?tid=Build&tab=1

Hosting Organization Midstate District Bulls Soccer Club Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Jason Eribek Title _____ Phone () _____ W

Address 3112 Cactus Trail Email jeeribek@gmail.com Phone 706-231-9548 H

City Martinez State GA Zip Code 30907-0871 Phone () _____ FAX

State Association or Affiliate SCYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Blanchard Woods / Patriots Park **TEAM ENTRY DEADLINE:** 01/24/2023

Date(s) of Tournament or Games 01/28/2023 & 01/29/2023 Estimated # of Teams 75

Tournament or Games Director or Contact Person Andrew Hammer Phone 706-550-2558 W

Address 3685 Riverwatch Parkway Ste 148 Email bullsdoc12@gmail.com Phone () _____ H

City Martinez State GA Zip Code 30907 Phone 815-301-7054 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 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	3	50	4	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U- 9 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	7	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U- 10 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	7	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U- 11 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	7	<input checked="" type="checkbox"/>	3	550	<input type="checkbox"/>
U- 12 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	60	7	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 13 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	60	11	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 14 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	60	11	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 15 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	70	11	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U- 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>

SMALL SIDED RULES-

- Event will use build-up line for 7v7: Yes No N/A
- Event will use build-up line for offside for 7v7: Yes No N/A
- Event will prohibit punting in 7v7: Yes No N/A
- Event will prohibit heading until: 11U 12U N/A

- 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

[Signature]

Date 7-6-22



APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

SC Youth Soccer

Date 7/18/22

By [Signature]

Title Executive Director