US Youth Soccer/South Carolina Youth Soccer

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Game __Electric City Cup__   Website URL: __clemsonandersonsocceralliance@gmail.__

Hosting Organization __Piedmont District - Clemson Anderson SA__   Type of Tournament: ☐ Select ☐ Recreational ☐ Select&Rec

Designate Official of Hosting Organization __Gary Greenwood Jr__   Title _____   Phone _____ W

Address __PO Box 217__   Email _____   _____ H

City __Sandy Springs__   State __SC__   Zip __29677-0217__   _____ Fax

State Association or Affiliate _____   Guest Referee Applications Accepted: ☐ Yes ☐ No

Location of Tournament or Games __Sandy Springs__   __SC__   **TEAM ENTRY DEADLINE:** _____

Date(s) of Tournament or Games __04/01/2017 - 04/02/2017__   Estimated # of Teams __50__

Tournament or Games Director or Contact Person __JimmyDUP GeorgeDUP__   Phone __(864) 844-2259__ W

Address __PO Box 217__   E-mail _____   _____ H

City __Sandy Springs__   State __SC__   Zip __296770217__   _____ 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
C1	U09		X	X	12 max	3	50 min	6	X	3	300	
C1	U10		X	X	12 max	3	50 min	6	X	3	300	
C1	U11		X	X	12 max	3	60 min	8	X	3	300	
C1	U12		X	X	12 max	3	60 min	8	X	3	300	

☐ **RT RESTRICTED TOURNAMENT** - US Youth Soccer Members and Affiliates only.

☐ Teams 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 gound 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 __South Carolina Youth Soccer Association__   Date _____

By _____   Title __State Commissioner__

APPROVED

South Carolina Youth Soccer - 7436 Broad River Rd #211, Irmo, SC 29063

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.