



US Youth Soccer/South Carolina Youth Soccer

APPLICATION TO HOST A TOURNAMENT OR GAMES



Name of Tournament or Game St. Patricks Day Cup Website URL: www.southcarolinaunitedfc.com

Hosting Organization Midstate District - South Carolina United FC Type of Tournament: ☐ Select ☐ Recreational ☐ Select&Rec

Designate Official of Hosting Organization Elaine Simpson Title _____ Phone (803) 767-3483 W

Address PO Box 2082 Email registrar@southcarolinaunitedfc.com H

City Columbia State SC Zip 29202-2082 Fax

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

Location of Tournament or Games Columbia SC **TEAM ENTRY DEADLINE:** _____

Date(s) of Tournament or Games 03/17/2018 - 03/18/2018 Estimated # of Teams 200

Tournament or Games Director or Contact Person Tripp Miller Phone (803) 446-2753 W

Address PO Box 24942 E-mail tournaments@southcarolinaunitedfc.com H

City Columbia State SC Zip 29224-4942 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
A	U08	SI, S2, S3, S4, RT	X	X	14	5	50	7	X	3	475	
A	U09	SI, S2, S3, S4, RT	X	X	14	5	50	7	X	3	475	
A	U10	SI, S2, S3, S4, RT	X	X	14	5	50	7	X	3	475	
A	U11	SI, S2, S3, S4, RT	X	X	16	5	60	9	X	3	550	
A	U12	SI, S2, S3, S4, RT	X	X	16	5	60	9	X	3	550	
C	U12	SI, S2, S3, S4, RT	X	X	22	5	70	11	X	3	650	
C	U13	SI, S2, S3, S4, RT	X	X	22	5	70	11	X	3	650	
C	U14	SI, S2, S3, S4, RT	X	X	22	5	70	11	X	3	650	
C	U15	S1, S2, S3, S4, RT	X	X	22	5	70	11	X	3	650	

- ☐ **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 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 South Carolina Youth Soccer Association Date _____



By [Signature] 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.