



Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games FORT LOWELL SHOOTOUT Website URL: www.fortlowellshootout.com

Hosting Organization FORT LOWELL SOCCER CLUB Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization GORDON MCKENZIE Title PRESIDENT Phone (520) -5291493 W

Address P.O. BOX 31181 Email flso@fortlowellshootout.com Phone (520) -5291493 H

City TUCSON State AZ Zip Code -857511181 Phone (520) -5291493 FAX

State Association or Affiliate ARIZONA YOUTH SOCCER ASSOCIATION Guest Referees Applications Accepted Yes No

Location of Tournament or Games TUCSON, ARIZONA **TEAM ENTRY DEADLINE:** DECEMBER 1, 2007

Date(s) of Tournament or Games JANUARY 18, 19 AND 20, 2008 Estimated # of Teams 350

Tournament or Games Director or Contact Person EILEEN S. MAJESKI Phone (520) -5291493 W

Address P.O. BOX 31181 Email flso@fortlowellshootout.com Phone (520) -5291493 H

City TUCSON State AZ Zip Code -857511181 Phone (520) -5291493 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/ 98	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	8	<input checked="" type="checkbox"/>	3	400	<input type="checkbox"/>
U- 10 8/1/ 97	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25	8	<input checked="" type="checkbox"/>	3	400	<input type="checkbox"/>
U- 11 8/1/ 96	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	30	11	<input checked="" type="checkbox"/>	3	425	<input type="checkbox"/>
U- 12 8/1/ 95	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	30	11	<input checked="" type="checkbox"/>	3	425	<input type="checkbox"/>
U- 13 8/1/ 94	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	35	11	<input checked="" type="checkbox"/>	3	425	<input type="checkbox"/>
U- 14 8/1/ 93	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	35	11	<input checked="" type="checkbox"/>	3	425	<input type="checkbox"/>
U- 15 8/1/ 92	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	40	11	<input checked="" type="checkbox"/>	3	425	<input type="checkbox"/>
U- 16 8/1/ 91	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	40	11	<input checked="" type="checkbox"/>	3	425	<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: MEXICO, ASIA, COSTA RICA

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 Eileen S. Majeski Date 02/27/2007

APPROVAL
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE AZ Youth Soccer Assoc Date 3/15/07

By [Signature] Title Tournament Chair

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.