



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 520 529-1493 W

Address P.O. BOX 31182 Email flso@fortlowellshootout.com Phone 520 529-1493 H

City TUCSON State AZ Zip 85751-1181 520 299-9067 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, 2011

Date(s) of Tournament or Games JANUARY 13, 14 AND 15, 2012 Estimated # of Teams 325

Tournament or Games Director or Contact Person EILEEN S. MAJESKI Phone 520 529-1493 W

Address P.O. BOX 31181 Email flso@fortlowellshootout.com Phone 520 870-9077 C

City TUCSON State AZ Zip 85751-1181 Phone 520 299-9067 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	8/1/ 03 S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	20	8	<input checked="" type="checkbox"/>	3	400	<input type="checkbox"/>
U- 9	8/1/ 02 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/ 01 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/ 00 S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	30	8	<input checked="" type="checkbox"/>	3	425	<input type="checkbox"/>
U- 12	8/1/ 99 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/ 98 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/ 97 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/ 96 S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	40	11	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U- 16	8/1/ 95 S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	40	11	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U- 17	8/1/ 94 S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	45	11	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U- 18	8/1/ 93 S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	45	11	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U-	8/1/	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U-	8/1/	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" 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: _____
- International Teams as listed: MEXICO, ASIA AND EUROPE

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 03/01/2011

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By Mark Thode

Date 6/16/2011
Title VP of Competition