



A Proud Member of US Soccer
 Affiliated with the Federation International de Football Association



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games COPA de MAYO Website URL: www.stspecialists.com
 Hosting Organization AZTECS FUTBOL CLUB Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization ALEX GUTIERREZ Title PRESIDENT Phone 619 392-9392 W
 Address P.O. BOX 434607 Email president@aztecsfutbolclub.org Phone () _____ H
 City SAN DIEGO State CA Zip Code 92154 Phone () _____ FAX
 State Association or Affiliate CAL SOUTH Guest Referees Applications Accepted Yes No
 Location of Tournament or Games 45 RANCH HOUR GLASS PARK SD CENTRAL, TBA TEAM ENTRY DEADLINE: APR. 2, 2020
 Date(s) of Tournament or Games MAY 2-3, 2020 Estimated # of Teams 150
 Tournament or Games Director or Contact Person ANTHONY FARACE Phone () 619-250-7962 W
 Address 10502 MISSION GORGE ROAD #120 Email anthony@stspecialists.com Phone () _____ H
 City SANTEE State CA Zip Code 92071 Phone () _____ 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>SI, SA, UT, RT</u>											
U-9	8/11	11										
U-9	8/11	11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	"	50	7	<input checked="" type="checkbox"/>	"	\$625	<input type="checkbox"/>
U-10	8/11	10	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	"	50	7	<input checked="" type="checkbox"/>	"	\$625	<input type="checkbox"/>
U-11	8/11	09	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	"	50	9	<input checked="" type="checkbox"/>	"	\$675	<input type="checkbox"/>
U-12	8/11	08	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	"	50	9	<input checked="" type="checkbox"/>	"	\$675	<input type="checkbox"/>
U-13	8/11	07	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	"	50	11	<input checked="" type="checkbox"/>	"	\$725	<input type="checkbox"/>
U-14	8/11	06	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	"	50	11	<input checked="" type="checkbox"/>	"	\$725	<input type="checkbox"/>
U-15	8/11	05	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	"	60	11	<input checked="" type="checkbox"/>	"	\$725	<input type="checkbox"/>
U-16	8/11	04	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	"	60	11	<input checked="" type="checkbox"/>	"	\$725	<input type="checkbox"/>
U-17	8/11	03	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	"	60	11	<input checked="" type="checkbox"/>	"	\$725	<input type="checkbox"/>
U-18/19	8/01		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	"	60	11	<input checked="" type="checkbox"/>	"	\$725	<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 International Other US Soccer Members as listed: _____
 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 11/15/2019

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Cal South

Date 12/30/2019

By

Title

President

