



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 Nightmare at the Rock Website URL: www.nightmareattherock.org

Hosting Organization South Central Soccer Academy Type of Tournament: X Select  Recreational  Select & Rec

Designate Official of Hosting Organization Kelly Lambert Title Tournament Director Phone 317 534-2619 W

Address 333 Springfield Circle Email kelly@kelbertindustries.com Phone 317 412-6186 C

City Greenwood State IN Zip Code 46143 Phone 317 534-2620 FAX

State Association or Affiliate Indiana Youth Soccer Guest Referees Applications Accepted X Yes  No

Location of Tournament or Games 4899 W. Whiteland Rd. Bargersville, IN 436106 **TEAM ENTRY DEADLINE:** October 3, 2011

Date(s) of Tournament or Games October 28 – 30, 2011 Estimated # of Teams 145

Tournament or Games Director or Contact Person Kelly Lambert Phone 317 534-2619 W

Address 333 Springfield Circle Email kelly@kelbertindustries.com Phone 317 412-6186 C

City Greenwood State IN Zip Code 46143 Phone 317 534-2620 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/ 02 S1,S2,S3	X	X	12	2	50	6	Participa.	3	\$400	<input type="checkbox"/>
U- 10	8/1/ 01 S1, S2, S3	X	X	12	2	50	6	Particip.	3	\$400	<input type="checkbox"/>
U- 11	8/1/ 00 S1, S2, S3	X	X	14	2	60	8	Yes	3	\$400	<input type="checkbox"/>
U- 12	8/1/ 99 S1, S2, S3	X	X	14	2	60	8	Yes	3	\$450	<input type="checkbox"/>
U- 13	8/1/ 98 S1,S2, S3	X	X	16	3	60	11	Yes	3	\$475	<input type="checkbox"/>
U- 14	8/1/ 97 S1, S2, S3	X	X	18	3	60	11	Yes	3	\$475	<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"/>
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 –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.

X UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: \_\_\_\_\_

X International Teams as listed: Canada

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 Kelly Lambert

Date 5/11/2011



(For Official Use Only)STATE ASSOCIATION OR AFFILIATE

INDIANA

Date June 16, 2011

By Sarah Cantwell Title Director of Member Services