



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 Veterans Invitational Tournament Website URL: www.veteransinvitational.com
 Hosting Organization Indiana Fire Juniors South Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Jack Strassweg Title President Phone (812) 455-2400 W
 Address PO Box 15906 Email _____ Phone () _____ H
 City Evansville State IN Zip Code 47716 Phone () _____ FAX
 State Association or Affiliate Indiana Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Evansville TEAM ENTRY DEADLINE: 10/5/2019
 Date(s) of Tournament or Games October 18-20, 2019 Estimated # of Teams 60
 Tournament or Games Director or Contact Person K.C. Bennett Phone (812) 499-0988 W
 Address PO Box 15906 Email Veteransinvitationaltournament@gmail.com Phone () _____ H
 City Evansville State IN Zip Code 47716 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-	9	1/1/	09	S1-S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50	7	Participati on	3	\$500	<input type="checkbox"/>
U-	10	1/1/	08	S1-S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	4	50	7	Participati on	3	\$500	<input type="checkbox"/>
U-	11	1/1/	07	S1-S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	4	60	9	<input checked="" type="checkbox"/>	3	\$575	<input type="checkbox"/>
U-	12	1/1/	06	S1-S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	4	60	9	<input checked="" type="checkbox"/>	3	\$575	<input type="checkbox"/>
U-	13	1/1/	05	S1-S4	X	X	22	4	70	11	X	3	\$725	<input type="checkbox"/>
U-	14	1/1/	04	S1-S4	X	X	22	4	70	11	X	3	\$725	<input type="checkbox"/>
U-		1/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		1/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		1/1/			<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		1/1/			<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.
UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: US Club
 TOURNAMENT International
 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 _____

K.C. Bennett

Date 4/20/19

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Indiana Soccer



Date June 7, 2019

By Angel Hall

Title Assoc. Director