



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 Jerry Yeagley Soccer Classic Website URL: www.yeagleclassic.org
 Hosting Organization Cutters Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Mike Grubb Title President Phone (812) 327-3826 W
 Address PO Box 3520 Email president@cuttersoccer.org Phone () _____ H
 City Bloomington State IN Zip Code 47402 Phone () _____ FAX
 State Association or Affiliate Indiana Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Karst Farm Park **TEAM ENTRY DEADLINE:** August 6, 2021
 Date(s) of Tournament or Games August 27-29, 2021 Estimated # of Teams 120
 Tournament or Games Director or Contact Person Matt Blaszk Phone 908 674-0363 W
 Address PO Box 3520 Email jerryyeagleclassic@cuttersoccer.org Phone () _____ H
 City Bloomington State IN Zip Code 47402 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/ 2012 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input type="checkbox"/>	4	\$420	<input type="checkbox"/>
U- 10	1/1/ 2011 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input type="checkbox"/>	4	\$420	<input type="checkbox"/>
U- 11	1/1/ 2010 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	60	9	<input checked="" type="checkbox"/>	3	\$575	<input type="checkbox"/>
U- 12	1/1/ 2009 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	60	9	<input checked="" type="checkbox"/>	3	\$575	<input type="checkbox"/>
U- 13	1/1/ 2008 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	70	11	<input checked="" type="checkbox"/>	3	\$675	<input type="checkbox"/>
U- 14	1/1/ 2007 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	70	11	<input checked="" type="checkbox"/>	3	\$675	<input type="checkbox"/>
U- 15	1/1/ 2006 S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	70	11	<input checked="" type="checkbox"/>	3	\$675	<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: _____
- 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 Mike Grubb Date 6/23/2021

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE Indiana Soccer Date July 28, 2021
Angel Hall
 By Angel Hall Title Associate Director

