

Please Type or Print Clearly - Do Not Staple

Affiliated with the Federation International de Football Association

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games CHULA VISTA FC CUP Website URL: WWW.CHULAVISTAFC.CUP.COM
 Hosting Organization CHULA VISTA YOUTH SOCCER LEAGUE Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization GUY BOCCIA Title PRESIDENT Phone (B) 5219340 W
 Address PO BOX 212288 Email _____ Phone (H) 5219340 H
 City CHULA VISTA State CA. Zip Code 91921 Phone (F) 673-7002 FAX
 State Association or Affiliate CALIFORNIA YOUTH SOCCER ASSOCIATION Guest Referees Applications Accepted Yes No
 Location of Tournament or Games SAN DIEGO TEAM ENTRY DEADLINE: JUNE 1, 2015
 Date(s) of Tournament or Games JULY 4, 5, 2015 Estimated # of Teams 150
 Tournament or Games Director or Contact Person RAFFI RUFOLO Phone (B) 5219340 W
 Address 18512 CANCASTLE WAY Email RAFFARU@ATT.NET Phone (H) 5219340 H
 City SAN DIEGO State CA. Zip Code 92128 Phone (F) 6737002 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-19 8/11	S1, S2, S3, S4, RT, ORP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	22	2x30	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-17 8/11	S1, S2, S3, S4, RT, ORP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	22	2x30	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-16 8/11	S1, S2, S3, S4, RT, ORP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x30	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-15 8/11	S1, S2, S3, S4, RT, ORP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x30	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-14 8/11	S1, S2, S3, S4, RT, ORP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x25	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-13 8/11	S1, S2, S3, S4, RT, ORP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x25	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-12 8/11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x25	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-11 8/11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x25	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-10 8/11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	18	2x25	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-10U 8/11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	14	2x20	8	<input checked="" type="checkbox"/>	3	525	<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.

UNRESTRICTED TOURNAMENT

Other US Soccer Members as listed: USYS ALL STATES, US CUB SOCCER, AYSA, ETC.

International

Teams as listed: ALL INTERNATIONAL TEAMS

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

[Signature]

Date 9 June 2015

APPROVAL



Cal South

Date 2/11/15

By

[Signature]

Title Presidents