



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

51st Annual Rudy LaMonica

Name of Tournament or Games Memorial Indoor Soccer Tourn. Website URL: OUSC.COM
 Hosting Organization Oceanside United Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Mike O'Malley Title President Phone 516 317-6829 W
 Address PO Box 81 Email omalleyousc@aol.com Phone 516 3176829 H
 City Oceanside State NY Zip Code 11572 Phone 516 741-4665 FAX
 State Association or Affiliate ENYSSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Coleman County, 55 Babylon Tpke, Freeport, NY 11520 TEAM ENTRY DEADLINE: 01/16/2016
 Date(s) of Tournament or Games 01/20/18 and 01/21/18 Estimated # of Teams 96
 Tournament or Games Director or Contact Person Neil Bloom Phone 516 640-7370 W
 Address 122 Jeffery Lane Email NBloom@Shankerlaw.com Phone 516 640-7370 H
 City Oceanside State NY Zip Code 11572 Phone 516 741-4665 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- 7	1/1/ 2011 RT, S1, S2, S3, S4	X	X	12	3	25 min	6	X	3	\$325	<input type="checkbox"/>
U- 8	1/1/ 2010 RT, S1, S2, S3, S4	X	X	12	3	25 min	6	X	3	\$325	<input type="checkbox"/>
U- 9	1/1/ 2009 RT, S1, S2, S3, S4	X	X	12	3	25 min	6	X	3	\$325	<input type="checkbox"/>
U- 10	1/1/ 2008 RT, S1, S2, S3, S4	X	X	18	3	25 min	7	X	3	\$360	<input type="checkbox"/>
U- 11	1/1/ 2007 RT, S1, S2, S3, S4	X	X	18	3	25 min	7	X	3	\$360	<input type="checkbox"/>
U- 12	1/1/ 2006 RT, S1, S2, S3, S4	X	X	18	3	25 min	6	X	3	\$360	<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>

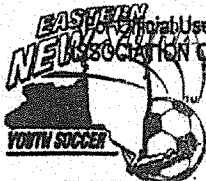
*List of types of teams and tournaments is on reverse side of this form.

- 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 (Open to all Federation affiliated participants)
 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

APPROVAL



(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By Enyssa

APPROVED 11/7/17
 LONG ISLAND JUNIOR SOCCER LEAGUE 11/13/17

Date 11/20/17
 Title of Fice