



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 City Showcase Tournament Website URL: www.cityshowcasetournament.org
 Hosting Organization South Bronx United Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Andrew So Title Executive Director Phone 718 404-9281 W
 Address PO Box 1267 Email showcase@southbronxunited.org Phone () _____ H
 City Bronx State NY Zip Code 10451 Phone () _____ FAX
 State Association or Affiliate East New York Youth Soccer Association Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Randall's Island, New York **TEAM ENTRY DEADLINE:** _____
 Date(s) of Tournament or Games March 28-30, 2024 Estimated # of Teams 100
 Tournament or Games Director or Contact Person Andrew So Phone 718 841-7422 W
 Address PO Box 1267 Email andrew@southbronxunited.org Phone () _____ H
 City Bronx State NY Zip Code 10451 Phone () _____ FAX

Age Groups Accepted	Type(s) of Team Accepted *			Roster Size	# Guest Players Allowed	Length of Games	# Players on Field	Awards	Minimum # of Games	Entry Fee	Bond
	B	G									
U- 14 1/1/ 10	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	yes	60	11	<input type="checkbox"/>	3	\$790	<input type="checkbox"/>
U- 15 1/1/ 09	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	yes	60	11	<input type="checkbox"/>	3	\$880	<input type="checkbox"/>
U- 16 1/1/ 08	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	yes	60	11	<input type="checkbox"/>	3	\$880	<input type="checkbox"/>
U- 17 1/1/ 07	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	yes	70	11	<input type="checkbox"/>	3	\$880	<input type="checkbox"/>
U- 19 1/1/ 05	UT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	yes	70	11	<input type="checkbox"/>	3	\$880	<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"/>
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 Andrew So Date 1/12/2024

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE Manitga CJSL Office

Date

Title



By _____

