



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 Celtic Cup Website URL: www.CelticCup.com
 Hosting Organization Celtic (cal south) Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Chris Van Duin Title Town Director Phone 909 578 9851 W
 Address Po Box 700 Email cvanduin@yahoo.com Phone () _____ H
 City Ontario State CA Zip Code 91762 Phone 909 945 5355 FAX
 State Association or Affiliate Cal South Guest Referees Applications Accepted Yes No
 Location of Tournament or Games San Bernardino Soccer Complex TEAM ENTRY DEADLINE: 2/25/17
 Date(s) of Tournament or Games March 11 & 12, 2017 Estimated # of Teams 120
 Tournament or Games Director or Contact Person Chris Van Duin Phone 909 578 9851 W
 Address Po Box 700 Email cvanduin@yahoo.com Phone () _____ H
 City Ontario State CA Zip Code 91762 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-14 8/1/03 | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 18 | UNLIMITED | 70 | 11 | <input checked="" type="checkbox"/> | 3 | 575 | <input type="checkbox"/> |
| U-15 8/1/02 | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 18 | ↓ | 70 | 11 | <input checked="" type="checkbox"/> | 3 | 575 | <input type="checkbox"/> |
| U-16 8/1/01 | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | | 70 | 11 | <input checked="" type="checkbox"/> | 3 | 575 | <input type="checkbox"/> |
| U-17 8/1/00 | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | | 70 | 11 | <input checked="" type="checkbox"/> | 3 | 575 | <input type="checkbox"/> |
| U-18 8/1/99 | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | | 70 | 11 | <input checked="" type="checkbox"/> | 3 | 575 | <input type="checkbox"/> |
| U-19 8/1/98 | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | | 70 | 11 | <input checked="" type="checkbox"/> | 3 | 575 | <input type="checkbox"/> |
| U- 8/1/ | ALL | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | | <input type="checkbox"/> | 2 | |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <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

[Signature]

Date 6/26/16

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Cal South

Date 7/21/2016

By

[Signature]

Title

President

