



US Youth Soccer

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Affiliated with the Federation Internationale de Football Association

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APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament CHARLESTON SELECT SOCCER SHOOTOUT - MEN'S

Hosting Organization MOUNT PLEASANT SOCCER CLUB

President or Chief Officer of Hosting Organization RANDY GLENN Telephone 843-568-6421 W

Address PO Box 946 () - () H

City Mt Pleasant State SC Zip 29465 () - () FAX

State Association or Affiliate SCYSA

Location of Tournament/Games Mt Pleasant, SC TEAM ENTRY DEADLINE SEPT 17TH, 2007

Date(s) of Tournament/Games OCT 27-28, 2007 Estimated # of Teams 100

Tournament Director/Contact Person Diana L. Drake Telephone 843.884.2528 W

Address 3201 Morningdale Dr E-mail d_ldrake@yahoo.com 843-224-0379 H

City Mt Pleasant State SC Zip 29466 843-849-2778 FAX

Age Divisions Accepted	Type(s) of Teams Accepted*	B	G	Roster Size	# of Guest Players Allowed	Length of Games	Ball Size	Awards	Min # Of Games	Entry Fee	Bond
U-11 8-1-96	FTHOU I			14	3	60 min	4	1st & 2nd	3	\$450	NO
U-12 8-1-95				14			4			\$450	
U-13 8-1-94				18			5			\$475	
U-14 8-1-93							5			\$475	
U-15 8-1-92							5				
U-16 8-1-91						80 min	5				
U-17 8-1-90							5				
U-18 8-1-89							5				
U-19 8-1-88							5				

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

Teams will be invited from: Foreign Teams (list below)** State Associations Affiliates (list below)** Other US Soccer Member Organization (list below)**

**Foreign Teams/State Associations/Affiliates/Other US Soccer Members: US Club soccer teams accepted.

\$50 INCREASE TO COVER MANDATORY SCYSA INSURANCE

Signature of President or Chief Officer of Hosting Organization Randy Glenn Date 2-13-07

APPROVAL (For Official Use Only)

STATE ASSOCIATION OR AFFILIATE South Carolina Youth Soccer Date 3/31/07

By [Signature] Title Cups and Games Director

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging or injury to persons or property sustained in the course of the approved event.



US YOUTH SOCCER TOURNAMENT OR GAMES HOSTING AGREEMENT

In consideration of permission being granted to MPSC to hold a tournament or games at Mt Pleasant, SC on the dates of 02/20-28/2007

we agree to the following conditions:

- 1. ABIDE BY RULES: We shall abide by all statements made in our approved US Youth Soccer Application to Host A Tournament or Games...
2. INVITATIONS: The tournament or games approval form shall accompany all tournament or games invitations distributed us.
3. PROCURING LIABILITY INSURANCE: We have procured liability insurance coverage for the tournament or games with limits or not less than \$1,000,000/@2,000,000...
4. REQUIRING MEDICAL AUTHORIZATIONS: We shall require all teams participating in the tournament or games to provide medical authorizations for each player...
5. ADVANCE PUBLICATION OF RULES: We agree that our tournament or games rules shall be included with the invitation sent to each team...
6. CREDENTIALS CHECKS: We agree that we shall conduct credentials checks (check one) -- a. at registration, b. at the field prior to each game by a field marshal, or c. at both sites...
7. USE OF US SOCCER REGISTERED REFEREES: We agree that we shall, in accordance with US Soccer Bylaw 532, use for all games only US Soccer registered referees who are in good standing...

Name Bob WERN Telephone 843 813-3445 FAX () Address E-mail hey.ref@earthlink.net City State Zip

- 8. USE OF FIELD MARSHALS -- FIELD INSPECTION: We agree that during the tournament or games each game field will have a field marshal assigned to it at all times; that the field marshal will be readily available and identifiable; that prior to the commencement of every game the field marshal will inspect the field to be sure that it is free from objects or conditions that may cause injury. If any condition exists which cannot be immediate corrected, it shall be brought to the attention of the referee and the tournament/games director. The Director of Field Marshals is:

Name RANDY GLENN Telephone 843 568-6421 FAX () Address E-mail r.rang21@201.com City State Zip

- 9. USE OF SPECTATOR LINES: We agree to take appropriate steps including, where feasible, the use of spectator lines on each field to keep the spectators of the touch line.

10. **PROVISION OF ADEQUATE TOURNAMENT COMMUNICATION:** We agree to provide adequate communication by means of cell phones between the game fields and the tournament/games headquarters. The Tournament Communication Director is:

Name RANDY GLENN Telephone () - FAX () -
Address _____ E-mail _____
City _____ State _____ Zip _____

11. **AVAILABILITY OF POLICE AND RESCUE SERVICE:** We have notified the local police, ambulance, and emergency rescue services of the date of the tournament or games and the times and fields which will be used for games, and have been advised by them that they will be available to render assistance if needed.

12. **TOURNAMENT OR GAME RULES -- BEHAVIOR:** We agree that our tournament or game rules contain provisions ensuring that the behavior of teams, players, coaches, and spectators is appropriately controlled, including specific provisions that --

- spell out the disciplinary measures to be imposed for the issuance of red and yellow cards or other improper conduct;
- indicate what procedures will be followed regarding protests and appeals;
- indicate that all disciplinary measures imposed by hosting organizations shall be limited to placing restrictions upon an individual's group participation in the tournament/games.
- Record the issuance of all red and yellow cards and other matters involving the conduct of a team, its players, coaches, and supporters and also report them immediately to the home State Association and the home club/league of the team; and
- State that the home State Association of Affiliate and the home club or league shall, except in the case of referee assault or abuse, have the responsibility for imposing, should circumstances warrant, additional penalties within their respective jurisdictions with regard to any matters arising from the tournament or games.

13. **TOURNAMENT CANCELLATION:** We agree that our tournament or game rules shall state what refunds, if any, shall be made to participating teams if all or a portion of the tournament or games is cancelled by the hosting organization for any reason.

14. **POST TOURNAMENT OR GAMES REPORT:** We agree that we shall file a Post Tournament or Games Report with the State Association or Affiliate granting us permission to host this tournament or games within 30 days after the conclusion of the tournament or games. We understand that failure to file the report shall preclude the tournament/games host from receiving approval for any tournament/games for the following seasonal years until the report is filed. The Post Tournament or Games Report shall include the following information:

- the number of teams participating in each age group (boys and girls);
- if a champion is determined, the name of the champion for each group;
- the number of teams from each State Association, Affiliate, other Organization Member, or foreign country;
- if "Sportsmanship Awards" are given, the criteria for the award and to who awards were given;
- the number of fields used for the tournament/games;
- the name of the sponsor, if any; and
- the names and teams of all player issued red and yellow cards, and details of any other matters involving the improper or unsportsmanlike conduct of a team, its players, coaches or supporters. **NOTE: Any incident of referee assault or referee to the alleged offender's club or league an home State Association, Affiliate, or other Organization Member immediately, but in no event later than 48 hours after an incident of referee assault or abuse.**

Randy Glenn
Signature of Hosting Organization President or Chief Officer
Date 2-13-07

Diana L. Drake
Signature of Tournament or Games Director
Date 6/21/07

Hosting Organization MPSC Telephone 843-568-6421
Address PO BOX 946 Fax () - E-mail rreng21@aol.com
City MT PLEASANT State SC Zip 29465

Tournament or Games Headquarters _____ Telephone () -
Address _____ Fax () - E-mail _____
City _____ State _____ Zip _____