716 8th Ave N.
Myrtle Beach, SC 29577
Phone: (843) 429-0006
Email: tournament@usclubsoccer.org

TOURNAMENT HOSTING APPLICATION

Please download this application template, input the required information, and email to tournament@usclubsoccer.org. Your tournament will be considered "Open" to all USSF affiliated members unless you specifically request otherwise. You may also print and fax the application, but email is strongly preferred. Please refer to "Tournament Rules and Sanctioning" (Policy Section 7), which can be found on the website. Upon signing this application you are agreeing to conditions of the Tournament Hosting agreement on page 2 of this document.

General Information:

1. Name of Tournament:	TD BANK Spring Friendlies		
2. Host Club Member:	**SEACOAST UNITED**		
3. Tournament Dates: **If this tournament must be cancelled, you MUST notify our office.**	**APRIL 10-11TH 2010**	**4**. Facility' Name:	SEACOAST UNITED SPORTS COMPLEX
5. Facility Owner Name and Address:	SEACOAST UNITED **PO BOX 779, HAMPTON, NH 03843**		

6. Tournament Director:	**Matt Sprague**	Telephone-W:	**603 926 8444 EX 209**
Address: City, State Zip:	**PO BOX 779, HAMPTON, NH 03843**	Telephone-H:	**603 315 0031**
		E-mail:	**msprague@seacoastunited.org**
		FAX:	**603 926 8555**
7.Disciplinary Committee Chairman:	**John Price**	Telephone-W:	**603 926 8444 EX 210**
Address City, State Zip	**PO BOX 779, HAMPTON, NH 03843**	Telephone-H:	**603 944 2581**
		E-mail:	**jprice@seacoastunited.org**
		FAX:	**603 926 8555**

Competition Information:

8.Type of Tournament**:**	**Unrestricted**	Yes X No☐			Yes ☐ No☐	
Unrestricted:: Open to affiliated teams from US Club Soccer, other USSF affiliated members; and foreign countries (upon USSF Approval).Restricted: Restricted to teams registered through US Club Soccer.						
9. Estimated Number of Teams:	Boys		Girls	**48**	Co-ed	

10. Team Entry Deadline:	**3/29/10**
11. *** # Foreign Teams:	
12. Teams Anticipated From What States:	**MA, CT, NY, VT, NH, ME**
13. Team Age Groups:	**U13-U18**
14. Team Size for each age group **(3v3, 4v4, etc)**:	**11V11**
15. Number of guest players/team from outside clubs:	**5 GUEST PLAYERS IF REQUIRED**
16. Source of Referees:	**NHSA**
17. USSF Certified Referee Assignor:	**PHIL FARIA**
18. Referee assignor phone number (indicate if work or home number).	**603 759 0057**

**Note that in all US Club Soccer sanctioned competitions, players will be permitted to play up in age group within the same club. No US Club Soccer teams will be required to obtain travel permission to participate.

***Any tournament involving international teams must also obtain permission from USSF. The two required USSF forms can be obtained from US Club Soccer on the Club Resources page in the Members Only Area of the US Club Soccer web site. The two additional USSF forms, a copy of the tournament rules and a $75 check made out to USSF should be sent to US Club Soccer along with this form. Once US Club Soccer has approved this form and noted this on the USSF forms, US Club Soccer will forward the two USSF forms, a copy of the tournament rules and the $75 check to USSF.

Signature of President or Chief Officer of Host Club	JOHN PRICE	Date:	12/29/09

APPROVAL Approved **DENIAL**

By _____

Title **Director** **Date** **03/01/2010**

www.usclubsoccer.org