



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 Yellowstone Cup Website URL: www.yellowstonecup.com

Hosting Organization Upper Valley Soccer Foundation Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Debbie Miles Title Club President Phone (208) 201-7318 W

Address P O Box 261 Email dmiles18@gmail.com Phone () _____ H

City Rexburg State ID Zip Code 83440-0261 Phone () _____ FAX

State Association or Affiliate US Youth Soccer Guest Referees Applications Accepted Yes No

Location of Tournament or Games Rexburg Idaho **TEAM ENTRY DEADLINE:** May 15, 2018

Date(s) of Tournament or Games June 7, 8, 9, 2018 Estimated # of Teams 100

Tournament or Games Director or Contact Person Holly Allen Phone () _____ W

Address PO Box 261 Email yellowstonecup@gmail.com Phone () _____ H

City Rexburg State ID Zip Code 83440-0261 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-	9	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	525	<input type="checkbox"/>
U-	10	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	525	<input type="checkbox"/>
U-	11	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	525	<input type="checkbox"/>
U-	12	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	525	<input type="checkbox"/>
U-	13	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-	14	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-	15	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-	16	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-	17	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-	18	1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	575	<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: _____
- 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 Holly S. Allen Date 12-28-2017

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE IDAHO YOUTH SOCCER Date 1/2/18

By [Signature] Title EXEC DIR