



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 Adidas United Cup of Champions Website URL: www.tnunited.com
 Hosting Organization TN UNITED SOCCER CLUB Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Jim Carr Title Tournament Director Phone () _____ W
 Address P. O. Box 1088 Email jcarr@tnunited.com Phone () _____ H
 City Hendersonville State TN Zip Code 37077 Phone () _____ FAX
 State Association or Affiliate TSSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Moss Wright & Drakes Creek TEAM ENTRY DEADLINE: 8-20-10
 Date(s) of Tournament or Games 9-24-10 thru 9-26-10 Estimated # of Teams 185
 Tournament or Games Director or Contact Person Jim Carr Phone () _____ W
 Address P. O. Box 1088 Email tuscupinfo@gmail.com Phone () _____ H
 City Hendersonville State TN Zip Code 37077 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	8/11 01	6v6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	2X25	6	<input type="checkbox"/>	3	395	<input type="checkbox"/>
U- 10	8/11 00	6v6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	2X25	6	<input type="checkbox"/>	3	395	<input type="checkbox"/>
U- 10	8/11 00	8V8	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	2X25	8	<input type="checkbox"/>	3	450	<input type="checkbox"/>
U- 11	8/11 99	8V8	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	2X30	8	<input type="checkbox"/>	3	450	<input type="checkbox"/>
U- 12	8/11 98	8V8	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	2X30	8	<input type="checkbox"/>	3	450	<input type="checkbox"/>
U- 12	8/11 98	11V11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	2X30	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>
U- 13	8/11 97	11V11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	2X35	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>
U- 14	8/11 96	11V11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	2X35	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>
U- 15	8/11 95	11V11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	3	2X40	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>
U- 16	8/11 94	11V11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	3	2X40	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>
U- 17	8/11 93	11V11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	3	2X40	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>
U- 18	8/11 92	11V11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	3	2X40	11	<input type="checkbox"/>	3	495	<input type="checkbox"/>

- 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: US Club, AYSO, USSSA
 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 _____ Date _____

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE Tennessee State Soccer Assoc Date 6/7/2010
 By [Signature] Title _____
Executive Director