



A Proud Member of US Soccer
 Affiliated with the Federation International de Football Association



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APPLICATION TO HOST A TOURNAMENT OR GAMES
EAST MEADOW SOCCER TOURNAMENT

Name of Tournament or Games SPONSORED BY COVANTA Website URL: WWW.EASTMEADOWSOCCER.COM
 Hosting Organization EAST MEADOW SOCCER CLUB Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization STEVEN EPSTEIN Title Vice President Phone 516 650-1247 W
 Address 785 PARK LANE Email EPPYSHOUSE@AOL.COM Phone 516 794-3397 H
 City EAST MEADOW State NY Zip Code 11554 Phone 516 292-2702 FAX
 State Association or Affiliate ENYSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games LONG ISLAND, NY TEAM ENTRY DEADLINE: JULY 15, 2010
 Date(s) of Tournament or Games AUGUST 28, 29, 2010 Estimated # of Teams 400
 Tournament or Games Director or Contact Person STEVEN EPSTEIN Phone 516 650-1247 W
 Address 785 PARK LANE Email EPPYSHOUSE@AOL.COM Phone 516 794-3397 H
 City EAST MEADOW State NY Zip Code 11554 Phone 516 292-2702 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-8 8/11/02	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input checked="" type="checkbox"/>	5	525	<input type="checkbox"/>
U-9 8/11/01	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input checked="" type="checkbox"/>	5	525	<input type="checkbox"/>
U-10 8/11/00	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	50	7	<input checked="" type="checkbox"/>	5	625	<input type="checkbox"/>
U-11 8/11/99	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15	3	50	9	<input checked="" type="checkbox"/>	5	625	<input type="checkbox"/>
U-12 8/11/98	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3/5	725	<input type="checkbox"/>
U-13 8/11/97	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3/5	725	<input type="checkbox"/>
U-14 8/11/96	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3/5	725	<input type="checkbox"/>
U-15 8/11/95	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3/5	725	<input type="checkbox"/>
U-16 8/11/94	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3/5	725	<input type="checkbox"/>
U-17-19 8/11/1993-1991	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3/5	725	<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: _____

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

[Handwritten Signature]

APPROVED
 LONG ISLAND JUNIOR SOCCER LEAGUE

12-8-09 Date 11/22/09

EASTERN NY YOUTH SOCCER ASSOC. INC.

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By *[Handwritten Signature: Kelly Wolfe]*

Date 12/19/09
 Title *[Handwritten: office]*