



Amended from original PTH:
- Name change
- Age group changes
- Fee changes

Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Burlington Shootout Website URL: https://burlingtonshootout.leagueapps.com/

Hosting Organization Burlington Soccer Club Type of Tournament: Select Recreational Select & Rec
336-306-5664

Designate Official of Hosting Organization Ashley Shanlever Title Club Administrator Phone () _____ W

Address 3205 Alex Faye Dr Email admin@bscsoccer.net Phone () _____ H

City Burlington State NC Zip Code 27217 Phone () _____ FAX

State Association or Affiliate NCYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Springwood Park **TEAM ENTRY DEADLINE: 9/22/2023**

Date(s) of Tournament or Games 10/7/2023-10/8/2023 Estimated # of Teams 70-90

Tournament or Games Director or Contact Person Mike Tribout Phone () 314-630-8974 _____ W

Address 4038 Dunkirk Dr Email president@bscsoccer.net Phone () 336-554-3630 _____ H

City Burlington State NC Zip Code 27215 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/ 15 SA | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 12 | 5 | 50 | 7 | <input checked="" type="checkbox"/> | 3 | \$425/\$475 | <input type="checkbox"/> |
| U- 10 | 1/1/ 14 SA | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 12 | 5 | 50 | 7 | <input checked="" type="checkbox"/> | 3 | \$425/\$475 | <input type="checkbox"/> |
| U- 11 | 1/1/ 13 S2, S3 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 16 | 5 | 60 | 9 | <input checked="" type="checkbox"/> | 3 | \$650/\$700 | <input type="checkbox"/> |
| U- 12 | 1/1/ 12 S2, S3 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 16 | 5 | 60 | 9 | <input checked="" type="checkbox"/> | 3 | \$650/\$700 | <input type="checkbox"/> |
| U- 13 | 1/1/ 11 S1, S2, S3 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | 5 | 60 | 11 | <input checked="" type="checkbox"/> | 3 | \$700/\$750 | <input type="checkbox"/> |
| U- 14 | 1/1/ 10 S1, S2, S3 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | 5 | 60 | 11 | <input checked="" type="checkbox"/> | 3 | \$700/\$750 | <input type="checkbox"/> |
| U- | 1/1/ | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- | 1/1/ | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- | 1/1/ | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- | 1/1/ | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <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: _____

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 Ashley Shanlever Date 6/6/2023

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE NCYSA  Date 6/8/23

By Susanne Conlon Title VP Tournaments