



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Carolina Shootout & YA

Name of Tournament or Games Festival 2024 Website URL: www.charlottesocceracademy.com

Hosting Organization Charlotte Soccer Academy Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Dan Dudley Title Director Phone (704) 7917032 W

Address 13333 Dorman Rd Email ddudley@charlottesocceracademy.com Phone () H

City Pineville State NC Zip Code 28134 Phone (704) 708 4512 FAX

State Association or Affiliate NCYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Charlotte **TEAM ENTRY DEADLINE:** Oct-21st 2024

Date(s) of Tournament or Games Nov 2-3 2024 Estimated # of Teams 150

Tournament or Games Director or Contact Person Dan Dudley Phone (704) 7917032 W

Address 13501 Dorman Rd Email ddudley@charlottesocceracademy.com Phone () H

City Pineville State NC Zip Code 28134 Phone (704) 7084512 FAX

				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
9	U	1/1/	16	SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	50	7	<input type="checkbox"/>	3	350	<input type="checkbox"/>
10	U	1/1/	15	SA	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	5	50	7	<input type="checkbox"/>	3	350	<input type="checkbox"/>
11	U	1/1/	14	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	850	<input type="checkbox"/>
12	U	1/1/	13	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	850	<input type="checkbox"/>
13	U	1/1/	12	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<input type="checkbox"/>
14	U	1/1/	11	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<input type="checkbox"/>
15	U	1/1/	10	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<input type="checkbox"/>
16	U	1/1/	09	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<input type="checkbox"/>

				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
17	U	1/1/	08	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<input type="checkbox"/>
18	U	1/1/	07	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<input type="checkbox"/>
19	U	1/1/	06	S1, S2, S3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	1025	<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** (Open to all Federation affiliated participants)
- International Teams as listed: US Club, AYSO, All Affiliates

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 President of Hosting Organization [Signature] Date 083024

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

NCYSA
By Susanne Conlon



Date 9/6/24
Title VP Tournaments