

Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Red Earth Invitational Website URL: www.nokcsoccer.com
 Hosting Organization NOKC Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Gabi Noble Title President Phone (405) 650-2792 W
 Address _____ Email Gabinoble75@sbcglobal.net Phone (405) 340-3266 H
 City _____ State _____ Zip Code _____ Phone () _____ FAX
 State Association or Affiliate OSA Guest Referees Applications Accepted Yes No
 Location of Tournament or Games NOKC Soccer Club **TEAM ENTRY DEADLINE:** February 19th, 2018
 Date(s) of Tournament or Games March 9-11, 2018 Estimated # of Teams 140
 Tournament or Games Director or Contact Person Gary Boreham Phone (405) 305-9309 W
 Address 5108 Lyon Drive Email borehamsoccer@cox.net Phone () _____ H
 City Norman State OK Zip Code 73072 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- 7-8 8/1/ | J | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 8 | 1 | 40 | 4 | <input checked="" type="checkbox"/> | 3 | 300 | <input type="checkbox"/> |
| U- 9-10 8/1/ | J | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 12 | 2 | 50 | 7 | <input checked="" type="checkbox"/> | 3 | 400 | <input type="checkbox"/> |
| U- 11-12 8/1/ | S1/S2/S3/S4 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 16 | 3 | 60 | 9 | <input checked="" type="checkbox"/> | 3 | 500 | <input type="checkbox"/> |
| U- 13-15 8/1/ | S1/S2/S3/S4 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 22 | 3 | 60 | 11 | <input checked="" type="checkbox"/> | 3 | 550 | <input type="checkbox"/> |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | <input type="checkbox"/> | | | <input type="checkbox"/> |
| U- 8/1/ | | <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 Gary Boreham Date 10/4/2017

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By Pauletta Price

Date 1/10/18
 Title Director of Competitive Programs