



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 RED EARTH INVITATIONAL Website URL: www.nokcsoccer.com
Hosting Organization NOKC Type of Tournament: ☐ Select ☐ Recreational ☒ Select & Rec
Designate Official of Hosting Organization GABY 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 13TH
Date(s) of Tournament or Games MARCH 4TH - 6TH, 2022 Estimated # of Teams 120
Tournament or Games Director or Contact Person GARY BOREHAM Phone 405 305-9309 W
Address 19637 CASTLEBERRY DRIVE Email gboreham@okenergyfc.org Phone () _____ H
City EDMOND State OK Zip Code 73012 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-	10	1/1/		S1/S2/S3/S4/J/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	60	9	<input checked="" type="checkbox"/>	3	\$500.00	<input type="checkbox"/>
U-	11	1/1/		S1/S2/S3/S4/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	60	9	<input checked="" type="checkbox"/>	3	\$500.00	<input type="checkbox"/>
U-	12	1/1/		S1/S2/S3/S4/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	60	9	<input checked="" type="checkbox"/>	3	\$500.00	<input type="checkbox"/>
U-	13	1/1/		S1/S2/S3/S4/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60	11	<input checked="" type="checkbox"/>	3	\$550.00	<input type="checkbox"/>
U-	14	1/1/		S1/S2/S3/S4/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60	11	<input checked="" type="checkbox"/>	3	\$550.00	<input type="checkbox"/>
U-	15	1/1/		S1/S2/S3/S4/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60	11	<input checked="" type="checkbox"/>	3	\$550.00	<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

GARY BOREHAM

Date 10/4/2021

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By



Date

10/15/21

Title

Director of Competitive Programs