



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

City Of Las Vegas Mayors

Name of Tournament or Games Cup International Showcase
Website URL: www.lvmayorscup.com
Hosting Organization Downtown Las Vegas Soccer Club
Type of Tournament: Select Recreational Select & Rec
Designate Official of Hosting Organization Gary Soresman Title Executive Director Phone (702) 400-1720 W
Address 6145 Spring Mountain #107 Email gary@downtownlvsc.com Phone () H
City Las Vegas State NV Zip Code 89146 Phone () FAX
State Association or Affiliate Nevada Guest Referees Applications Accepted Yes No
Location of Tournament or Games City of Las Vegas Multiple Fields TEAM ENTRY DEADLINE:
Date(s) of Tournament or Games February 17th-19th February 23rd -25th Estimated # of Teams
Tournament or Games Director or Contact Person Sherry Alexander Phone (702) 497-3988 W
Address 6145 Spring Mountain #107 Email info@lvmayorscup.com Phone () H
City Las Vegas State NV Zip Code 89146 Phone () FAX

Table with columns: 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. Rows include U-12, U-13, U-14, U-15, U-16, U-17, U-19, and U-8/1.

*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: Mexico, Canada, South Africa, Germany, France, Japan, Panama, Poland, Netherlands, United Kingdom

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

[Handwritten signature]

Date 05-17-2017

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

NYSA

Date 8/30/17

By [Handwritten signature]

Title President