



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 30<sup>th</sup> Annual Commando Soccer Website URL: www.hendersonville.soccer.com  
 Hosting Organization TUSC Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Cory Turner Title President Phone ( ) 264-0491 W  
 Address 148 Ervin Street Email cbturner@ortel.com Phone ( ) 424-5681 H  
 City Hendersonville State TN Zip Code 37075 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate TN Soccer Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Hendersonville High School **TEAM ENTRY DEADLINE:** Jan 22, 2010  
 Date(s) of Tournament or Games January 29-31, 2010 Estimated # of Teams 50  
 Tournament or Games Director or Contact Person Greg Farrell Phone ( ) 969-2956 W  
 Address 108 Pembroke Court Email farrells@comcast.net Phone ( ) 264-1678 H  
 City Hendersonville State TN Zip Code 37075 Phone ( ) 847-7150 FAX att.

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 8/11 2001	Select/ Rec	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	10 min	6	<input checked="" type="checkbox"/>	3	\$130	<input type="checkbox"/>
U- 10 8/11 2000		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 11 8/11 99		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 12 8/11 98		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 13 8/11 97		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 14 8/11 96		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				5	<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 15 8/11 95		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 16 8/11 94		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 17 8/11 93		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 18 8/11 92		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>			<input type="checkbox"/>

U- 19 8/11 91

\*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: \_\_\_\_\_
- 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

Cory B. Turner

Date 1/10/10

**APPROVAL**  
 (For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By Walt Beuh  
 Executive Director

Date 1/12/10  
 Title \_\_\_\_\_