APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games **Hot Dog Cup** Website URL: **https://www.chilisoccer.org/tournaments/hot-dog-cup**

Hosting Organization **Chili Soccer Association** Type of Tournament: ☐ Select ☒ Recreational ☐ Select & Rec

Designate Official of Hosting Organization **Mike Tompkins** Title **Director of House** Phone ( ) 5857495232 W

Address **PO Box 109** Email **csa.tompkins@gmail.com** Phone ( ) H

City **North Chili** State **NY** Zip Code **14514** Phone ( ) FAX

State Association or Affiliate **NYSW** Guest Referees Applications Accepted ☐ Yes ☐ No

Location of Tournament or Games **Davis Park** **TEAM ENTRY DEADLINE:** **5/1/24**

Date(s) of Tournament or Games **6/22/24-6/23/24** Estimated # of Teams **50**

Tournament or Games Director or Contact Person **Mike Tompkins** Phone ( ) 5857495232 W

Address **1 Tyler Terrace** Email **csa.tompkins@gmail.com** Phone ( ) H

City **Rochester** State **NY** Zip Code **14624** 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- 8	1/1/	16	RT	☒x	☒	10	-	40	5	☒	3	200	☒
U- 10	1/1/	14	RT	☒	☒	14	-	48	7	☒	3	225	☒
U- 13	1/1/	11	RT	☒	☒	18	-	50	9	☒	3	250	☒
U- 16	1/1/	08	RT	☒	☒	22	-	50	11	☒	3	250	☒
U- 19	1/1/	05	RT	☒	☒	22	-	60	11	☒	3	250	☒
U-	1/1/			☒	☒					☒			☒
U-	1/1/			☒	☒					☒			☒
U-	1/1/			☒	☒					☒			☒
U-	1/1/			☒	☒					☒			☒
U-	1/1/			☒	☒					☒			☒

***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** 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 **Amy L. Wood** Date **11/22/23**

NEW YORK STATE WEST YOUTH SOCCER ASSOCIATION
APPROVED

TATE
IATE **NYS West Youth Soccer Assoc** Date **12/12/2023**

By *Pam Whitcomb* Title **Operations Manager**