



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 Northport Cow Harbor Annual Columbus Day Weekend Tournament Website URL: www.northporttournament.com

Hosting Organization Northport cow Harbor United Soccer Club Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization Matthew Power Title President Phone (est) 680-9810 W

Address 6 Thrush Court Email President@nchu.org Phone () _____ H

City East Northport State NY Zip Code 11731 Phone () _____ FAX

State Association or Affiliate ENYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games TBD but within the Town of Huntington-Smithtown TEAM ENTRY DEADLINE: TBD

Date(s) of Tournament or Games October 9th-10th (Sat/Sun) 2021 Estimated # of Teams 240

Tournament or Games Director or Contact Person ~~William Buitenkant~~ Matthew Power 11/5/21 Phone (est) 827-5656 W

Address 6 Thrush Ct Email _____ Phone () _____ H

City Northport State NY Zip Code 11731 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-9	11/1 2012 S1,2,3,RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	50	7	<input checked="" type="checkbox"/>	3-4	TBD	<input type="checkbox"/>
U-10	11/1 2011 "	<input type="checkbox"/>	<input type="checkbox"/>	16	11	50	7	<input checked="" type="checkbox"/>			<input type="checkbox"/>
U-11	11/1 2010 "	<input type="checkbox"/>	<input type="checkbox"/>	18	11	50	9	<input checked="" type="checkbox"/>			<input type="checkbox"/>
U-12	11/1 2009 "	<input type="checkbox"/>	<input type="checkbox"/>	18	11	50	9	<input checked="" type="checkbox"/>			<input type="checkbox"/>
U-13	11/1 2008 "	<input type="checkbox"/>	<input type="checkbox"/>	20	11	60	11	<input checked="" type="checkbox"/>			<input type="checkbox"/>
U-14	11/1 2007 "	<input type="checkbox"/>	<input type="checkbox"/>	20	11	60	11	<input checked="" type="checkbox"/>			<input type="checkbox"/>
U-	11/1	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	11/1	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	11/1	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-	11/1	<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: _____
- 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

[Handwritten Signature]

APPROVED
LONG ISLAND JUNIOR SOCCER LEAGUE

Date 11/9/2021

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By

[Handwritten Signature]
ENYSA

Date

Title

RECEIVED
11/15/2021

[Handwritten Signature]