



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Rocky Mountain Cup Boys 2012 Website URL: www.BCFORCE.com

Hosting Organization BC FORCE Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization RYAN HENKEL Title TOURNAMENT DIRECTOR Phone (703) 432-9542 W

Address 1510 28th St. Suite 100 Email RYAN.HENKEL@BCFORCE.COM Phone (703) 432-9542 H

City BOULDER State CO Zip Code 80303 Phone (703) 406-7566 FAX

State Association or Affiliate CO Youth Soccer Guest Referees Applications Accepted Yes No

Location of Tournament or Games PLEASANT VIEW SOCCER COMPLEX TEAM ENTRY DEADLINE: MAY 1ST

Date(s) of Tournament or Games JUNE 15-17 2012 Estimated # of Teams 85

Tournament or Games Director or Contact Person RYAN HENKEL Phone (703) 432-9542 W

Address 4059 NEVIS ST Email RYAN.HENKEL@BCFORCE.COM Phone (703) 432-9542 H

City BOULDER State CO Zip Code 80301 Phone (703) 406-7566 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- 11 8/1 00	S, S, S, S, S, DDP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	5	60	18	<input checked="" type="checkbox"/>	4	\$ 800.00	<input type="checkbox"/>
U- 12 8/1 99		<input checked="" type="checkbox"/>	<input type="checkbox"/>			60		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 13 8/1 98		<input checked="" type="checkbox"/>	<input type="checkbox"/>			60		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 14 8/1 97		<input checked="" type="checkbox"/>	<input type="checkbox"/>			60		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 15 8/1 96		<input checked="" type="checkbox"/>	<input type="checkbox"/>			70		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 16 8/1 95		<input checked="" type="checkbox"/>	<input type="checkbox"/>			70		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 17 8/1 94		<input checked="" type="checkbox"/>	<input type="checkbox"/>			70		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 18 8/1 93		<input checked="" type="checkbox"/>	<input type="checkbox"/>			70		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 19 8/1 92		<input checked="" type="checkbox"/>	<input type="checkbox"/>			70		<input checked="" type="checkbox"/>			<input type="checkbox"/>
U- 8/1		<input checked="" 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: USCUBS, DDP
- 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

[Signature]

Date _____

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

CYS

Date 11/22/11

By

[Signature]

Title Exec. Asst / Tournament