



APPLICATION TO HOST A TOURNAMENT OR GAMES

A Proud Member of US Soccer

Affiliated with the Federation International de Football Association



Please Type or Print Clearly - Do Not Staple

Name of Tournament or Games 19th Cherry Hill FC Tournament Website URL: cherryhillfcsoccer.com
 Hosting Organization Cherry Hill FC Type of Tournament Select Recreational Select & Rec
 Designate Official of Hosting Organization Alun Feldman Title President Phone 609-619-1451 W
 Address 4 Lamp Post Lane Email afeld14@verizon.net Phone 856-751-7774 H
 City Cherry Hill State NJ Zip Code 08003 Phone () FAX
 Location of Tournament or Games Delov, Berk, Richtman TEAM ENTRY DEADLINE: 5/8/2017
 Date(s) of Tournament or Games June 2nd - 4th 2017 Estimated # of Teams 120
 Tournament or Games Director or Contact Person Sarah Schrader Phone 609 313 0338 W
 Address 1432 Delicous Way Email libraryg127@hvt Phone 609 238 2159 H
 City Cherry Hill State NJ Zip Code 08003 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 8/1/1		✓	✓	14	4	50	7	1st & 2nd	4	\$445	NO
U-9 8/1/1		✓	✓	14	4	50	7		4	\$445	
U-10 8/1/1		✓	✓	14	4	50	7		4	\$445	
U-11 8/1/1		✓	✓	14	5	60	9		4	\$445	
U-12 8/1/1		✓	✓	14	5	60	9		4	\$445	
U-13 8/1/1		✓	✓	18	5	60	11		3	\$500	
U-14 8/1/1		✓	✓	18	5	70	11		3	\$500	
U-15 8/1/1		✓	✓	18	5	70	11		3	\$500	
U-16 8/1/1		✓	✓	18	5	70	11		3	\$500	
U-17 8/1/1		✓	✓	18	5	70	11		3	\$500	

*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.

International Teams as listed: _____

UT UNRESTRICTED TOURNAMENT Other US Soccer Members Listed: US Club

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 2/16/17

By: Melissa Sherwood Title: _____

APPROVAL (For Official Use Only)

STATE NJYS OFFICE

Date: MAR 06 2017