



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 OBGC Capital Cup Website URL: https://www.elitetournaments.com/tournament/obgc-capital-cup-0

Hosting Organization OBGC Type of Tournament Select Recreational Select & Rec

Designate Official of Hosting Organization Ken Bradford Title Executive Director Phone (301) 570-3990 W

Address P.O. Box 2 Email director@obgc.com Phone () _____ H

City Olney State MD Zip Code 20830 Phone () _____ FAX

State Association or Affiliate MSYSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games Olney, MD and Columbia, MD TEAM ENTRY DEADLINE: July 19, 2019

Date(s) of Tournament or Games August 31- Sept 2, 2019 Estimated # of Teams _____

Tournament or Games Director or Contact Person Kiley Graham Phone (443) 542-9649 W

Address 9160 Rumsey Rd Suite B3 Email kgraham@elitetournaments.com Phone () _____ H

City Columbia State MD Zip Code 21045 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-	1/1/	11-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50	7	<input checked="" type="checkbox"/>	3	775	<input type="checkbox"/>
U	10-	1/1/	10-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50	7	<input checked="" type="checkbox"/>	3	775	<input type="checkbox"/>
U	11-	1/1/	09-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	6	50	9	<input checked="" type="checkbox"/>	3	795	<input type="checkbox"/>
U	12-	1/1/	08-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	6	50	9	<input checked="" type="checkbox"/>	3	795	<input type="checkbox"/>
U	13-	1/1/	07-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	6	60	11	<input checked="" type="checkbox"/>	3	995	<input type="checkbox"/>
U	14-	1/1/	06-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	6	60	11	<input checked="" type="checkbox"/>	3	995	<input checked="" type="checkbox"/>
U	15-	1/1/	05-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	70	11	<input checked="" type="checkbox"/>	3	1,035	<input checked="" type="checkbox"/>
U	16-	1/1/	04-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	70	11	<input checked="" type="checkbox"/>	3	1,035	<input checked="" type="checkbox"/>
U	17-	1/1/	03-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	70	11	<input checked="" type="checkbox"/>	3	1,035	<input checked="" type="checkbox"/>
U	18-	1/1/	02-	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	70	11	<input checked="" type="checkbox"/>	3	1,035	<input checked="" type="checkbox"/>
U	19	1/1/	01	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	70	11	<input checked="" type="checkbox"/>	3	1,035	<input checked="" 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 International Other US Soccer Members as listed: US Club Soccer
- 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

Ken Bradford

Date 6/24/19

APPROVAL

STATE ASSN. : MSYSA

BY: G. FRENCH

DATE: 7/11/19

TITLE: PROGRAMS DIRECTOR

June 19, 2019

To whom it may concern:

I will be the referee assignor for OBG Capital Cup on August 31- September 2, 2019. I currently possess current USSF status as an Assignor, State Assessor, State Referee and Associate Instructor. We will also use for all games only US Soccer registered referees who are in good standing (unless US Soccer has granted a waiver to allow the use of authorized referees from another country). There will also be adequate number of US Soccer registered referees available in the area during the tournament or games dates to cover the scheduled games.

Proper documentation can be provided upon request to support the above statement.

I can be reached via email to answer any questions or concerns.

Regards,

Mark Jennings

markelite@outlook.com