



A Proud Member of US Soccer  
Affiliated with the Federation International de Football Association



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### APPLICATION TO HOST A TOURNAMENT OR GAMES

**Columbia Invitational Memorial Day**  
 Name of Tournament or Games Tournament Website URL: www.elitetournaments.com  
 Hosting Organization SAC Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Robert Grandfield Title President Phone (443) 542-9649 W  
 Address 4560 Centennial Lane Email president@sac-hc.org Phone ( ) \_\_\_\_\_ H  
 City Columbia State MD Zip Code 20142 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affillate MSYSA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Columbia, MD **TEAM ENTRY DEADLINE:** April 1, 2019  
 Date(s) of Tournament or Games May 24-27, 2019 Estimated # of Teams 650  
 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

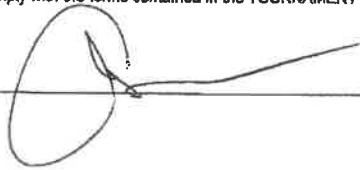
Age Groups Accepted	Type(s) of Team Accepted *	B	G	Roster Size	# Guest Players Allowed	Length of Games	# Players on Field	Awards	Minimum # of Games	Entry Fee	Bond	
U- 8	1/1/ 11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50	7	<input checked="" type="checkbox"/>	3	\$785	<input type="checkbox"/>
U- 9	1/1/ 10	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50	7	<input checked="" type="checkbox"/>	3	\$785	<input type="checkbox"/>
U- 10	1/1/ 09	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	6	50	7	<input checked="" type="checkbox"/>	3	\$785	<input type="checkbox"/>
U- 11	1/1/ 08	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	6	50	9	<input checked="" type="checkbox"/>	3	\$860	<input type="checkbox"/>
U- 12	1/1/ 07	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	6	50	9	<input checked="" type="checkbox"/>	3	\$860	<input type="checkbox"/>
U- 13	1/1/ 06	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	6	60	11	<input checked="" type="checkbox"/>	3	\$1035	<input type="checkbox"/>
U- 14	1/1/ 05	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	6	60	11	<input checked="" type="checkbox"/>	3	\$1035	<input type="checkbox"/>
U- 15	1/1/ 04	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	60	11	<input checked="" type="checkbox"/>	3	\$1060	<input type="checkbox"/>
U- 16	1/1/ 03	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	80	11	<input type="checkbox"/>	3	\$1085	<input type="checkbox"/>
U- 17	1/1/ 02	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	80	11	<input type="checkbox"/>	3	\$1085	<input type="checkbox"/>
U- 18	1/1/ 01	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	80	11	<input type="checkbox"/>	3	\$1085	<input type="checkbox"/>
U- 19	1/1/ 00	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	6	80	11	<input type="checkbox"/>	3	\$1085	<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.  
 **TOURNAMENT** **UT UNRESTRICTED** Other US Soccer Members as listed: US Club Soccer  
 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



Date 12/17/19

#### APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By MSYSA  
CANDACE FRENCH

Date 1/28/19  
Title PROGRAMS DIRECTOR

January 2, 2019

To whom it may concern:

I will be the referee assignor for the Columbia Invt. Memorial Day Tournament May 24-27, 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](mailto:markelite@outlook.com)