



Please Type or Print Clearly – Do Not Staple

### APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games McLean Premier Cup Website URL: https://www.elitetournaments.com/tournament/  
 Hosting Organization Virginia State Soccer - McLean Youth Soccer Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Louise Waxler Title Executive Director Phone ( ) \_\_\_\_\_ W  
 Address PO Box 724 Email louise.waxler@mcleansoccer.org Phone 443-542-9649 H  
 City McLean State VA Zip Code 22101 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate VYSA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Fairfax VA **TEAM ENTRY DEADLINE: 02/12/2021**  
 Date(s) of Tournament or Games 03/06/2021 - 03/07/2021 Estimated # of Teams 150  
 Tournament or Games Director or Contact Person Mike Libber Phone ( ) \_\_\_\_\_ W  
 Address PO Box 54 Email mllibber@elitetournaments.co m Phone 443-542-9649 H  
 City West Friendship State MD Zip Code 21794 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- 13	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	950	<input checked="" type="checkbox"/>
U- 14	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	950	<input checked="" type="checkbox"/>
U- 15	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3	950	<input checked="" type="checkbox"/>
U- 16	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3	1050	<input checked="" type="checkbox"/>
U- 17	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3	1050	<input checked="" type="checkbox"/>
U- 18	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3	1050	<input checked="" type="checkbox"/>
U- 19 /20	T	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	60	11	<input checked="" type="checkbox"/>	3	1050	<input checked="" type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-		<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** (Open to all Federation affiliated participants)
- International Teams as listed: US Club/ SAY/ AYSO

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

Louise Waxler

Date 12-23-20

### APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

Virginia Youth Soccer Assoc.

Date 1/4/2021

By Kristen Osteen

Title Membership Manager

for P. Summers

Executive Director