



US Youth Soccer
A Proud Member of US Soccer

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APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games: **The Nation's Capital Cup- Girl's Weekend**
 Hosting Organization: **McLean Youth Soccer**
 Website: <https://www.elitetournaments.com/tournament/nations-capital-cup-girls-weekend>

President or Chief Officer of Hosting Organization: **Louise Waxler**
 Title: **Executive Director**
 Address: **P.O. Box 724 McLean, VA 22101**
 Telephone: **443-542-9649 (H) 443-542-9649 (W) 443-542-9649 (FAX)** Email: louisewaxler@mcleansoccer.org

State Association or Affiliate: **Virginia Youth Soccer Association**
 Location of Tournament or Games: **Northern Virginia**
 Date(s) of Tournament or Games: **11/13/2021 - 11/14/2021** Team Entry Deadline: **10/22/2021**
 Estimated Number of Teams: **200**

Address of Field (Tournament Headquarters): **Elite Tournaments PO Box 54 West Friendship, MD 21794**

Tournament or Games Director or Contact Person: **Mike Libber**
 Address: **PO Box 54, West Friendship, MD 21794**
 Telephone: **443-542-9649 (H) 443-542-9649 (W) 443-542-9649 (FAX)** Email: mllibber@elitetournaments.com

Age Groups Accepted	Type(s) of Team Accepted	Gender	Roster Size	# Guest Players Allowed	Length of Games	Ball Size	Awards	Min# of Games	Entry Fee	Bond
U09	J	F	14	5	50	4	Yes	3	850	No
U10	J	F	14	5	50	4	Yes	3	850	No
U11	J	F	16	5	50	4	Yes	3	875	No
U12	J	F	16	5	50	4	Yes	3	875	No
U13	J	F	18	5	60	5	Yes	3	1075	No
U14	J	F	18	5	60	5	Yes	3	1075	Yes
U15	J	F	18	5	70	5	Yes	3	1075	Yes
U16	J	F	22	5	70	5	Yes	3	1095	Yes
U17	J	F	22	5	70	5	Yes	3	1095	Yes
U18	J	F	22	5	70	5	Yes	3	1095	Yes
U19	J	F	22	5	70	5	Yes	3	1095	Yes

Teams will be invited from: **Foreign Teams (List Below), All US Youth Soccer State Associations, Other US Soccer Member Organizations (List Below)**

Foreign Teams/State Associations/Affiliates/Other US Soccer Members: **US Club, SAY, AYSO

President or Chief Officer of Hosting Organization: *Louise Waxler*

Date: 1-29-21

APPROVAL

(For Official Use Only)

STATE Virginia Youth Soccer Assoc. Date: 2/3/2021
 ASSOCIATION _____
 OR AFFILIATE: _____

By: *Kristen Osteen*

Title: **Membership Manager**

for P. Summers Executive Director