



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: 2019 North Hempstead Cup Website URL: www.northhempsteadcup.com
 Hosting Organization: Port Washington Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization: Edward Romero Title: President Phone () 516-508-1161 W
 Address: PO Box 2067 Email: ironbear4@gmail.com Phone () _____ H
 City: Port Washington State: NY Zip Code: 11050 Phone () _____ FAX
 State Association or Affiliate: Eastern New York Guest Referees Applications Accepted Yes No
 Location of Tournament or Games: Nassau County, NY TEAM ENTRY DEADLINE: _____
 Date(s) of Tournament or Games: October 12-13, 2019 Estimated # of Teams: 200
 Tournament or Games Director or Contact Person: Skip Stern Phone (516) 524 9115 W
 Address: PO Box 2131 Email: skipstern@aol.com Phone () _____ H
 City: New Hyde Park State: NY Zip Code: 11040 Phone (516) 767 9509 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	11/1 2011 5.1 v 5.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	2x25	7v7	<input checked="" type="checkbox"/>	3	\$475	<input type="checkbox"/>
U-10	11/1 2010 11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	3	2x25	7v7	<input checked="" type="checkbox"/>	3	\$475	<input type="checkbox"/>
U-11	11/1 2007 11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	2x25	9v9	<input checked="" type="checkbox"/>	3	\$475	<input type="checkbox"/>
U-12	11/1 2008 11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	2x25	9v9	<input checked="" type="checkbox"/>	3	\$475	<input type="checkbox"/>
U-13	11/1 2007 11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	2x30	11v11	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U-14	11/1 2006 11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	2x30	11v11	<input checked="" type="checkbox"/>	3	\$500	<input type="checkbox"/>
U-15-U18	11/1 2005-2002 " "	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	2x30	11v11	<input type="checkbox"/>	3	\$600	<input type="checkbox"/>
U-11/1		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-11/1		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-11/1		<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.
 UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: US AFFILIATES
 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

Edward Romero
EASTERN NEW YORK

Date 7/9/2019

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By Miguel Cerezo



Date 7/19/19

Title OFFICER