



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 Brentwood Father's Day Tournament Website URL: www.brentwoodyouthsoccer.com  
 Hosting Organization Brentwood Youth Soccer Club, Inc. Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Violette Smith Title President Phone ( ) 6313982527 W  
 Address 19 Pelham Drive Email vsmith19y@yahoo.com Phone ( ) 6313982527 H  
 City Brentwood State NY Zip Code 11717 Phone ( ) 6313982527 FAX  
 State Association or Affiliate Eastern New York Youth Soccer Association Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Brentwood State Park TEAM ENTRY DEADLINE: 6/1/2023  
 Date(s) of Tournament or Games 6/17/2023-6/18/2023 Estimated # of Teams 60  
 Tournament or Games Director or Contact Person Herb Chow Phone ( ) 6312523603 W  
 Address 183 Prospect Place Email hc7566@yahoo.com Phone ( ) 6312523603 H  
 City Bayshore State NY Zip Code 11706 Phone ( ) 6319514480 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. 6 1/1/	S3/S4/RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	N/A	50	5V5	<input checked="" type="checkbox"/>	3	425.00	<input type="checkbox"/>
U. 7 1/1/	S3/S4/RT	<input type="checkbox"/>	<input type="checkbox"/>	12	N/A	50	7V7	<input type="checkbox"/>	3	525.00	<input type="checkbox"/>
U. 8 1/1/	S3/S4/RT	<input type="checkbox"/>	<input type="checkbox"/>	12	N/A	50	7V7	<input type="checkbox"/>	3	525.00	<input type="checkbox"/>
U. 9 1/1/	S3/S4/RT	<input type="checkbox"/>	<input type="checkbox"/>	12	N/A	50	7V7	<input type="checkbox"/>	3	525.00	<input type="checkbox"/>
U. 10 1/1/	S3/S4/RT	<input type="checkbox"/>	<input type="checkbox"/>	12	N/A	50	7V7	<input type="checkbox"/>	3	525.00	<input type="checkbox"/>
U. 11 1/1/	S3/S4/RT	<input type="checkbox"/>	<input type="checkbox"/>	15	N/A	50	9V9	<input type="checkbox"/>	3	550.00	<input type="checkbox"/>
U. 12 1/1/	S3/S4/RT	<input type="checkbox"/>	<input type="checkbox"/>	15	N/A	50	9V9	<input type="checkbox"/>	3	550.00	<input type="checkbox"/>
U. 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U. 1/1/		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U. 1/1/		<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.
- UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: All Affiliated USYSA
- 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 Violette Smith

APPROVED  
 LONG ISLAND JUNIOR SOCCER LEAGUE Date 3/15/2023  
3-20-23

**APPROVAL**

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE \_\_\_\_\_

By \_\_\_\_\_



3-21-23