



Please Type or Print Clearly - Do Not Staple

**APPLICATION TO HOST A TOURNAMENT OR GAMES**

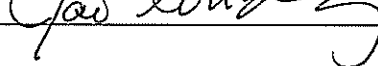
Name of Tournament or Games		<b>Superfeet Baker Blast</b>	Website URL: <b>www.whatcomsoccer.com</b>	
Hosting Organization		<b>Whatcom Co. Youth Soccer Assoc.</b>	Type of Tournament: <input checked="" type="checkbox"/> Select	<input type="checkbox"/> Recreational
Designate Official of Hosting Organization		<b>Joe Gonzalez</b>	Title <b>President</b>	Phone <b>(360) 676-1919 W</b>
Address: <b>1225 Civic Field Way</b>		Email <b>jija@clearwire.net</b>		Phone <b>(360) 384-4691 H</b>
City <b>Bellingham</b>		State <b>WA</b>	Zip Code <b>98229</b>	FAX <b>(360) 734-4514</b>
State Association or Affiliate		<b>WSYSA</b>	Guest Referees Applications Accepted <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Location of Tournament or Games		<b>Northwest Soccer Park</b>	TEAM ENTRY DEAD LINE:	<b>May 18, 2007</b>
Date(s) of Tournament or Games		<b>June 26-28, 2009</b>	Estimated # of Teams	<b>150</b>
Tournament or Games Director or Contact Person		<b>Lance Calloway</b>	Phone W <b>(360)676-1919x 109</b>	
Address <b>1225 Civic Field Way</b>		Email <b>lance@whatcomsoccer.com</b>		Phone H
City <b>Bellingham</b>		State <b>WA</b>	Zip Code <b>98229</b>	FAX <b>(360) 734-4514</b>

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- 11	8/1/ 98	S1, S2, S3, S4	X	X	14	7	60 min.	9	YES	3	\$450	No
U- 12	8/1/ 97	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 13	8/1/ 96	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 14	8/1/ 95	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 15	8/1/ 94	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 16	8/1/ 93	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 17	8/1/ 92	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 18	8/1/ 91	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U- 19	8/1/ 90	S1, S2, S3, S4	X	X	18	7	60 min.	11	YES	3	\$450	No
U-	8/1/											
U-	8/1/											
U-	8/1/											

\*List of types of teams and tournaments is on reverse side of this form.

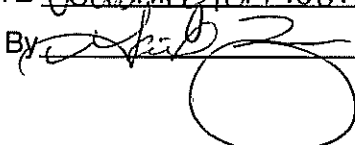
- RT RESTRICTED TOURNAMENT - US Youth Soccer Members and Affiliates only.
- Team will be restricted to teams within the national state association  Teams will be invited from all US Youth State Associations/Affiliates only.
- UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: US Club Soccer and USL Super Y
- Foreign 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 10/16/08

**APPROVAL**  
(For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Washington Youth Soccer Date 11/14/09

By  Title VP Camp

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.