



A Proud Member of US Soccer  
Affiliated with the Federation International de Football Association

Hudson Valley Youth Soccer League, Inc.  
1906 Route 52, Suite C  
Hopewell Junction, NY 12533

Please Type or Print Clearly - Do Not Staple

*Chris DeLorci*

**APPLICATION TO HOST A TOURNAMENT OR GAMES**

Name of Tournament or Games Latrange Cup Website URL www.latrangesoccer.org  
 Hosting Organization Latrange Soccer Club Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Danielle Reilly Title Treasurer/Tour. Dir. Phone ( ) \_\_\_\_\_ W  
 Address P.O. Box 101 Email treasurer@latrangesoccer.org Phone ( ) \_\_\_\_\_ H  
 City Latrange State NY Zip Code 12540 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate HV45L Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Stringham Park TEAM ENTRY DEADLINE: August 10th, 2024  
 Date(s) of Tournament or Games August 31 + September 1, 2024 Estimated # of Teams 100  
 Tournament or Games Director or Contact Person Danielle Reilly Phone ( ) \_\_\_\_\_ W  
 Address P.O. Box 101 Email treasurer@latrangesoccer.org Phone ( ) \_\_\_\_\_ H  
 City Latrange State NY Zip Code 12540 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-8	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	7	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U-9	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	7	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U-10	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	7	<input checked="" type="checkbox"/>	3	450	<input type="checkbox"/>
U-11	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	50	9	<input checked="" type="checkbox"/>	3	500	<input type="checkbox"/>
U-12	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	50	9	<input checked="" type="checkbox"/>	3	500	<input type="checkbox"/>
U-13	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	50	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-14	11/11	<input type="checkbox"/>	<input type="checkbox"/>	22	3	50	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-15	11/11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	50	11	<input checked="" type="checkbox"/>	3	575	<input type="checkbox"/>
U-16	11/11	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
U-17	11/11	<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:  
 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 *Danielle Reilly*

Date 5/16/24

**APPROVAL**

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



*[Handwritten signature]*  
5-16-24