



A Proud Member of US Soccer

*Chris Galini*

Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games: NYSC Orange Cup Website URL: www.nysscny.com  
 Hosting Organization: Orange County Soccer Club Type of Tournament:  B  C  Racquetball  Field & Rac  
 Designate Official of Hosting Organization: Chris Galini The President Phone: 845-312-0734  
 Address: 1000 3rd St Email: info@nysscny.com Phone: \_\_\_\_\_  
 City: Montgomery State: NY Zip Code: 12549 FAX: \_\_\_\_\_  
 State Association or Affiliate: NYSSA Guest Referee Applications Accepted:  Yes  No  
 Location of Tournament or Games: Montgomery Sports Dome TEAM ENTRY DEADLINE  
 Date(s) of Tournament or Games: 1-18-2025 & 1-19-2025 Estimated # of Teams: 100  
 Tournament or Games Director or Contact Person: Douglas Stahl Phone: \_\_\_\_\_  
 Address: 1000 3rd St From: Douglas Stahl (1000 3rd St) Phone: 845-312-0734  
 City: Montgomery State: NY Zip Code: 12549 Phone: \_\_\_\_\_

Age Groups Accepted	Type(s) of Team Accepted	B	G	Roster Size	# Guest Players Allowed	Length of Games	# Playoffs in Field	Arbiters	# of	Fee
U 9 1/11	5-15 2-5 3-4	<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 9 1/12		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 10 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 11 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 12 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 13 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 14 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 15 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 16 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		
U 17 1/11		<input type="checkbox"/>	<input type="checkbox"/>	11	2	25 min	8	<input type="checkbox"/>		

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

- RY RESTRICTED TOURNAMENT** - Open only to members of US Youth Soccer and its State Assocns
- Teams will be restricted to teams within the state association  teams will be invited from US Youth Soccer Association/State
- UT UNRESTRICTED TOURNAMENT** Other US Soccer Activities as listed
- Teams as listed: \_\_\_\_\_

The Hosting Organization agrees to be bound by and comply with the terms of the TOURNAMENT AND GAME HOSTING AGREEMENT and all applicable rules of the approving State Association or Affiliates.

Signature of Designated Official of Hosting Organization: Chris Galini

Chris Galini

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_



11-18-24