



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

C.D.Y.S.L.
19 Aviation Road
Suite 9
Albany, NY 12205-1142

Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games May Day Classic Tournament Website URL saratogawiltonsoccerclub.com/tournaments/may-day-classic-tournament/
 Hosting Organization Saratoga-Wilton Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Sarah Schenone Title Board Secretary Phone 518-727-6480 W
 Address PO Box 1292 Email maydayclassic@saratogawiltonsoccerclub.com Phone () H
 City Saratoga Springs State NY Zip Code 12866 Phone () FAX
 State Association or Affiliate CDYSL Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Gavin Park; 10 Lewis Drive, Wilton, NY 12831 **TEAM ENTRY DEADLINE:** 3/1/24
 Date(s) of Tournament or Games May 2-4, 2025 Estimated # of Teams 140
 Tournament or Games Director or Contact Person Sarah Schenone Phone 518-727-6480 W
 Address PO Box 1292 Email maydayclassic@saratogawiltonsoccerclub.com Phone () H
 City Saratoga Springs State NY Zip Code 12866 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 1/1/2017	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	20 Minute Running Clock	4x4	<input checked="" type="checkbox"/>	4	\$500	<input type="checkbox"/>
U-10 1/1/2015 1/1/2016	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	25 Minute Running Clock	7v7	<input checked="" type="checkbox"/>	4	\$700	<input type="checkbox"/>
U-12 1/1/2013 1/1/2014	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	3	24-minute halves w/ 2 minute half time, 50 minute Running Clock	9v9	<input checked="" type="checkbox"/>	4	\$900	<input type="checkbox"/>
U-14 1/1/2011 1/1/2012	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	24-minute halves w/ 2 minute half time, 50 minute Running Clock	11v11	<input checked="" type="checkbox"/>	4	\$1000	<input type="checkbox"/>
U-16 1/1/2009 1/1/2010	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	24-minute halves w/ 2 minute half time, 50 minute Running Clock	11v11	<input checked="" type="checkbox"/>	4	\$1000	<input type="checkbox"/>
U-19 1/1/2006 1/1/2007 1/1/2008	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	24-minute halves w/ 2 minute half time, 50 minute Running Clock	11v11	<input checked="" type="checkbox"/>	4	\$1000	<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: TBD
 Teams as listed: TBD

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 Sarah Schenone

Date 9/7/24

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By _____

Date _____

Title _____



11-13-24