



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

Please Type or Print Clearly - Do Not Staple

C.D.V.S.L.  
16 Aviation Road  
Suite 9  
Albany, NY 12205-1142

### APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Mountain Mayhem Website URL: www.northernunitedsc.com  
 Hosting Organization Northern United Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Tim Streefer Title Admin Phone ( ) 518.307.3627 W  
 Address 11 bridge st Email mmsoccertournament@gmail.com Phone ( ) \_\_\_\_\_ H  
 City Fort Edward State NY Zip Code 12828 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate ENYSSL Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Ridge Jenkinville Queensbury/Golden Goal fort ann NY **TEAM ENTRY DEADLINE:** \_\_\_\_\_  
 Date(s) of Tournament or Games MAY 10, 2025 Estimated # of Teams 120  
 Tournament or Games Director or Contact Person Tim Streefer Phone ( ) 518.796.2159 W  
 Address 49 Oak View Dr Email tstreefer@kyleco.com Phone ( ) \_\_\_\_\_ H  
 City Fort Edward State NY Zip Code 12828 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/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	20	2 x 4	<input checked="" type="checkbox"/>	4		<input type="checkbox"/>
U- 10 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	4	25	7	<input checked="" type="checkbox"/>	4		<input type="checkbox"/>
U- 12 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	4	25	8	<input checked="" type="checkbox"/>	4		<input type="checkbox"/>
U- 14 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input checked="" type="checkbox"/>	4		<input type="checkbox"/>
U- 16 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input checked="" type="checkbox"/>	4		<input type="checkbox"/>
U- 18 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	4	25	11	<input checked="" type="checkbox"/>	4		<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"/>
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: \_\_\_\_\_  
 International  
 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 *Edward DeLorenzo* Date 12/22/23

### APPROVAL

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



*1-10-25*