

05-19-'10 16:27 FROM VA Youth Soccer ASSO 703-551-4114

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US Youth Soccer
A Proud Member of US Soccer

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games: **Williamsbury Cup**
 Hosting Organization: **Virginia Legacy Soccer Club**
 Website: **www.vallegacyssoccer.com/tournaments/williamsbury-cup**

President or Chief Officer of Hosting Organization: **Stuart Spirn**
 Title: **President**

Address: **1117 Old Colony Lane, Williamsburg VA 23185**
 Telephone: **757-253-8572 (H) 757-253-8572 (W) 757-253-8573 (FAX)** Email: **stuspirn@vallegacyssoccer.com**

patrick@spirn.com

State Association or Affiliate: **Virginia Youth Soccer Association**
 Location of Tournament or Games: **Warhill Sports Complex**
 Date(s) of Tournament or Games: **9/4/2010 - 9/5/2010** Team Entry Deadline: **8/25/2010**
 Estimated Number of Teams: **100**

Address of Field (Tournament Headquarters): **WARHILL sports Complex 5700 Warhill Trail, Williamsburg VA 23108**

Tournament or Games Director or Contact Person: **Patrick McStey**
 Address: **1117 Old Colony Lane, Williamsburg VA 23185**
 Telephone: **757-253-8572 (H) 757-253-8572 (W) 757-253-8573 (FAX)** Email: **mcmstey@vallegacyssoccer.com**

Age Groups Accepted	Typical(s) of Team Accepted	Gender	Field Size	# Guest Players Allowed	Length of Game(s)	Field Size	Avenue	No. # of Games	Entry Fee
U10	J	FM	14	5	60	4	1st/2nd	3	500
U11	J	FM	14	5	60	4	1st/2nd	3	500
U12	J	FM	14	5	60	4	1st/2nd	3	500
U13	J	FM	16	5	70	5	1st/2nd	3	600
U14	J	FM	18	5	70	5	1st/2nd	3	600
U15	J	FM	18	5	70	5	1st/2nd	3	500
U16	J	FM	18	5	80	5	1st/2nd	3	600
U17	J	FM	18	5	80	5	1st/2nd	3	600
U18	J	FM	18	5	80	5	1st/2nd	3	600
U19	J	FM	18	5	80	5	1st/2nd	3	600

Teams will be invited from: **Foreign Teams (List Below), All US Youth Soccer State Associations, Other US Soccer Member Organizations (List Below)**
 *Foreign Teams/State Associations/Affiliates/Other US Soccer Members: All, as club, youth, etc.

President or Chief Officer of Hosting Organization:

Date: 5/20/10

Stuart Spirn

APPROVAL
(For Official Use Only)

STATE
ASSOCIATION
OR AFFILIATE:

Date:

By:

Title:

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Games Report shall include the following information:

- a. the number of teams participating in each age group (boys and girls);
- b. if a champion is determined, the name of the champion for each group;
- c. the number of teams from each State Association, Affiliate, other Organization Member, or foreign country;
- d. if "Sportsmanship Awards" are given, the criteria for the award and to whom awards were given;
- e. the number of fields used for the tournament/games;
- f. the name of the sponsor, if any; and
- g. the names and teams of all players issued red and yellow cards, and details of any other matters involving the improper or unsportsmanlike conduct of a team, its players, coaches or supporters. NOTE: Any incident of referee assault or referee abuse by a player, coach, manager, club official, or game official, or other incidents of a serious nature, must be reported to the alleged offender's club or league and home State Association, Affiliate, or other Organization Member immediately, but in no event later than 48 hours after an incident of referee assault or abuse.

Signature: [Signature] Hosting Organization President or Chief Officer

Date: 5/20/10

Signature: [Signature] Tournament or Game Director

Date: 5/20/10

Hosting Organization
 Virginia legacy soccer club
 1117 old colony lane
 Williamsburg, VA 23185
 E-mail: msctay@vralegacysoccer.com
 Telephone: 757-253-8572
 Fax: 757-253-8572

Tournament or Games Headquarters
 W/ARLBEI sports Complex
 5700 Warfield Trail
 Williamsburg, VA 23189
 E-mail: msctay@vralegacysoccer.com
 Telephone: 757-253-8572
 Fax: 757-253-8572