

Please Type or Print Clearly – Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games		Indy Premier Halloween Classic		Website URL:		www.indypremiersc.org/classic	
Hosting Organization		Indy Premier Soccer Club		Type of Tournament:		<input checked="" type="checkbox"/> Select <input type="checkbox"/> Recreational <input type="checkbox"/> Select & Rec	
Designate Official of Hosting Organization		Jeff Utngue		Title		Tournament Director	
Address		9900 Westpoint Drive, Suite 124		Email		classic@indypremiersc.org	
City		Indianapolis		State		IN	
Zip Code		46256		Phone		()	
State Association or Affiliate		Indiana Soccer		Guest Referees Applications Accepted		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Tournament or Games		Fishers, IN		TEAM ENTRY DEADLINE:		Sept 30, 2018	
Date(s) of Tournament or Games		Oct 26-28, 2018		Estimated # of Teams		380	
Tournament or Games Director or Contact Person		Jeff Utngue		Phone		317 373-2349 W	
Address		9900 Westpoint Drive, Suite 124		Email		classic@indypremiersc.org	
City		Indianapolis		State		IN	
Zip Code		46256		Phone		()	

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/	11	S1, S2, S3	X	X	8	3	40	4	<input type="checkbox"/>	3	300	<input type="checkbox"/>
U-	9	1/1/	10	S1, S2, S3	X	X	12	3	50	7	<input type="checkbox"/>	3	550	<input type="checkbox"/>
U-	10	1/1/	09	S1, S2, S3	X	X	12	3	50	7	<input type="checkbox"/>	3	550	<input type="checkbox"/>
U-	11	1/1/	08	S1, S2, S3	X	X	16	3	60	9	X	3	650	<input type="checkbox"/>
U-	12	1/1/	07	S1, S2, S3	X	X	16	3	60	9	X	3	650	<input type="checkbox"/>
U-	13	1/1/	06	S1, S2, S3	X	X	18	3	60	11	X	3	750	<input type="checkbox"/>
U-	14	1/1/	05	S1, S2, S3	X	X	18	3	60	11	X	3	750	<input type="checkbox"/>
U-	15	1/1/	04	S1, S2, S3	X	X	18	6	70	11	X	3	750	<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: US Club Soccer
- ☐ 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



Jeffrey M Ktnage

Date May 7, 2018

APPROVAL

(For Official Use Only) STATE
ASSOCIATION OR AFFILIATE

INDIANA

Date May 25, 2018

By

Savan Conference

Title Director of Member Services