



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

Amy Kibbawa

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games Mad Dog Mania Showcase Tournament Website URL: maddogmania.com
 Hosting Organization Ballston Spa Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Ryan McKinley Title President Phone () 518 409-2711 W
 Address PO Box 2242 Email ryan.mckinley.bssc@gmail.com Phone () 518 409-2711 H
 City Ballston Spa State NY Zip Code 12020 Phone () 518 745-1462 FAX
 State Association or Affiliate Eastern NY Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Gavin Park & PBA Fields, Saratoga, NY **TEAM ENTRY DEADLINE:** MAY 15, 2017
 Date(s) of Tournament or Games June 24 & 25, 2017 Estimated # of Teams 130
 Tournament or Games Director or Contact Person Nancy Stangle Phone () 518 745-1462 W
 Address 3 Iroquois Drive Email nstangle@maddogmania.com Phone () 518 745-1461 H
 City Queensbury State NY Zip Code 12804 Phone () 518 745-1462 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- 16 1/1/ 01	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1125	<input type="checkbox"/>
U- 17 1/1/ 00	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1125	<input type="checkbox"/>
U- 18 1/1/ 99	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	Unlimited	55 Minutes	11	<input type="checkbox"/>	4	\$1125	<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"/>
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: US Club, just say it
 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 *Ryan McKinley* Date 1/20/17

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE



By *ATHENA SHAWOOD* Date 2/13/17
 Title office



U.S. SOCCER FEDERATION, INC.

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Albany, NY 12205-1142

APPLICATION TO HOST A GAME OR TOURNAMENT INVOLVING FOREIGN TEAMS (HAPP 4-11)

As it Relates to Amateur and Youth Teams

Affiliated with FIFA

PLEASE PRINT CLEARLY

Name of Game/Tournament Mad Dog Mania Showcase Tournament

Hosting Organization Ballston Spa Soccer Club

Location of Game/Tournament (City) Saratoga (State) NY

Date(s) of Game/Tournament June 24 & 25, 2017 Estimated # of Foreign Teams 1 - 5

Is this a paid-gate Game/Tournament? [] Yes [x] No

Game/Tournament Director Nancy Stangle Phone 518 745-1462

E-mail nstangle@maddogmania.com Fax 518 745-1462

FOREIGN TEAM(S) TO BE HOSTED

1. Name of Team to be Hosted TBD Age

Country Gender Male

2. Name of Team to be Hosted TBD Age

Country Gender Male

3. Name of Team to be Hosted TBD Age

Country Gender Male

*Attach a separate sheet for additional teams

Game/Tournament Director's Signature Nancy Stangle Date 1/28/17

CONFIRMED TEAM NAMES SHOULD BE SUBMITTED 30 DAYS PRIOR TO GAME/TOURNAMENT

APPROVAL (FOR OFFICE USE ONLY)

U.S. SOCCER FEDERATION, INC.

By

Title

Date

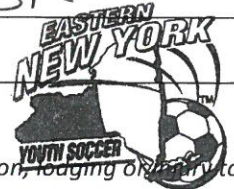
FOR ORGANIZATIONS AFFILIATED WITH U.S. SOCCER ONLY
I certify this application has been approved for domestic team participation.

By Arthura Shewood

Title office

USSF Org. Member ENYNSA

Date 2/13/17



In granting this permission to host a tournament or games, U.S. Soccer shall NOT be liable for transportation, lodging or injury to persons or property sustained in the course of the sanctioned event.