



US Youth Soccer/Missouri Youth Soccer

APPLICATION TO HOST A TOURNAMENT OR GAMES



Name of Tournament or Game Gateway Memorial Classic Website URL: www.slsgtournaments.com

Hosting Organization Eastern District - St. Louis Scott Gallagher Type of Tournament: ☒ Select ☐ Recreational ☐ Select&Rec

Designate Official of Hosting Organization Patrick Barry Title _____ Phone (314) 541-6906 W

Address 9557 Garber Rd Email sbrandt@slsgsoccer.com (314) 541-6906 H

City Saint Louis State MO Zip 631262817 Fax _____

State Association or Affiliate Missouri Youth Soccer Association Guest Referee Applications Accepted: ☐ Yes ☐ No

Location of Tournament or Games Fenton MO **TEAM ENTRY DEADLINE:** _____

Date(s) of Tournament or Games 05/28/2021 - 05/30/2021 Estimated # of Teams 200

Tournament or Games Director or Contact Person Mitch Bohnak Phone (636) 674-9581 W

Address 1 Soccer Park Rd E-mail mbohnak@slsgsoccer.com H

City Fenton State MO Zip 63026-2537 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
S U09	All Levels Accepted	X	X	12	5	50	7	X	3	\$595	
S U10	All Levels Accepted	X	X	12	5	50	7	X	3	\$595	
S U11	All Levels Accepted	X	X	16	5	60	9	X	3	\$695	
S U12	All Levels Accepted	X	X	16	5	60	9	X	3	\$695	
S U13	All Levels Accepted		X	22	5	70	11	X	3	\$795	
S U14	All Levels Accepted		X	22	5	70	11	X	3	\$795	
S U15	All Levels Accepted	X	X	22	5	70	9	X	3	\$795	
S U16	All Levels Accepted	X	X	22	5	70	11	X	3	\$865	
S U17	All Levels Accepted	X	X	22	5	70	11	X	3	\$865	
S U19	All Levels Accepted	X	X	22	5	70	11	X	3	\$865	

- ☐ **RT RESTRICTED TOURNAMENT** - US Youth Soccer Members and Affiliates only.
- ☐ Teams will be restricted to teams within the national state association. ☒ Teams will be invited from all US Youth State Associations/Affiliates only.
- ☒ **UT UNRESTRICTED TOURNAMENT** Other US Soccer Members as listed: _____
- ☒ Foreign 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 _____ Date _____

APPROVAL (For Official Use Only)

STATE ASSOCIATION OR AFFILIATE Missouri Youth Soccer Association Date 12/11/2020



By Mitch Cissell Title State Registrar

*Missouri Youth Soccer Association | 926 Hemsath Rd, Suite 102 | St. Charles, Missouri 63303**

APPROVED

In granting this permission to host a tournament or games, neither US Youth Soccer nor its State Associations or Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained in the course of the approved event.