



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

Please Type or Print Clearly - Do Not Staple

### APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games BEAT THE HEAT GIRLS Website URL: www.edmondsoccer.com  
 Hosting Organization Edmond Soccer Club Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization James Soesbee Title General Manager Phone 405 409-2324 W  
 Address \_\_\_\_\_ Email gm@edmondsoccer.com Phone ( ) \_\_\_\_\_ H  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate OSA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Edmond Soccer Complex **TEAM ENTRY DEADLINE: JULY 13TH, 2025**  
 Date(s) of Tournament or Games AUGUST 8TH - 10TH, 2025 Estimated # of Teams 240  
 Tournament or Games Director or Contact Person Gary Boreham Phone 405 305-9309 W  
 Address \_\_\_\_\_ Email registrar@edmondsoccer.com Phone ( ) \_\_\_\_\_ H  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ 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- 8-10 1/1/	S1 & S2 & S3 & RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	13	1	50	7	<input checked="" type="checkbox"/>	3	\$600	<input type="checkbox"/>
U- 10-12 1/1/	S1 & S2 & S3 & RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	2	60	9	<input checked="" type="checkbox"/>	3	\$725	<input type="checkbox"/>
U- 12-19 1/1/	S1 & S2 & S3 & RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60	11	<input checked="" type="checkbox"/>	3	\$825	<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: \_\_\_\_\_

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 J Soesbee Date 10/18/24

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By [Signature] Date 10/22/24 Title Dir. of Comp Programs

