



Please Type or Print Clearly – Do Not Staple

**APPLICATION TO HOST A TOURNAMENT OR GAMES**

Name of Tournament or Games Blackhawks Invitational Website URL: http://www.bhawksinvite.com  
 Hosting Organization Scottsdale Soccer Club Type of Tournament:  Select  Recreational  Select & Rec  
 Designate Official of Hosting Organization Stephanie Briguglio Title Executive VP Phone 602 684-2588 W  
 Address PO Box 5075 Email Briuglio@qwest.net Phone ( ) \_\_\_\_\_ H  
 City Scottsdale State AZ Zip Code 85261 Phone 480 767-7732 FAX  
 State Association or Affiliate AYSA Guest Referees Applications Accepted  Yes  No  
 Location of Tournament or Games Phoenix, AZ **TEAM ENTRY DEADLINE:** 15-Jan-2010  
 Date(s) of Tournament or Games February 26-28, 2010 Estimated # of Teams 160  
 Tournament or Games Director or Contact Person William D. (Bill) Varanese Phone 480 250-9270 W  
 Address PO Box 5075 Email BHI@ScottsdaleSoccer.com Phone (480) 837-2431 H  
 City Scottsdale State AZ Zip Code 85261 Phone 480 323-2749 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- 9 8/1/ 01	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	8	<input checked="" type="checkbox"/>	3	445	<input type="checkbox"/>
U- 10 8/1/ 00	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50	8	<input checked="" type="checkbox"/>	3	445	<input type="checkbox"/>
U- 11 8/1/ 99	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	60	8	<input checked="" type="checkbox"/>	3	445	<input type="checkbox"/>
U- 12 8/1/ 98	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60	11	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 13 8/1/ 97	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	70	11	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 14 8/1/ 96	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	70	11	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 15 8/1/ 95	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	80	11	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 16 8/1/ 94	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	80	11	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 17 8/1/ 93	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	80	11	<input checked="" type="checkbox"/>	3	495	<input type="checkbox"/>
U- 18 8/1/ 92	All	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	80	11	<input checked="" type="checkbox"/>	3	495	<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: AYSO, USCS  
 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 \_\_\_\_\_ Date \_\_\_\_\_

**APPROVAL**

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

AYSA  
 By [Signature] Date 6/29/09  
 Title AYSA TOURN COMM CHAIR