



# U.S. Soccer Federation, Inc.

## APPLICATION TO HOST A TOURNAMENT OR GAMES INVOLVING FOREIGN TEAMS (HAPP 3-03)

Affiliated with the Federation Internationale de Football Association

Please Type or Print Clearly

Please Type or Print Clearly

Name of Tournament or Games Clifton Park International Soccer Classic

Hosting Organization Clifton Park Soccer Club

State Association/or Sectional Director Eastern NY Soccer Association

Location (City) of Tournament/Games Clifton Park State New York

Date(s) of Tournament/Games July 12-14, 2013 Estimated # of Foreign Teams 8

Tournament/Games Director/Contact Person Tim Kimball Telephone Work (518) 527-8723

Ext \_\_\_\_\_

Address PO Box 377 Telephone Home (\_\_\_\_) \_\_\_\_\_

City Clifton Park State NY Zip 12065 Fax (\_\_\_\_) \_\_\_\_\_

### Foreign Teams to be Hosted

Name of Team to be Hosted \_\_\_\_\_ Age Division \_\_\_\_\_ M / F (circle one)  
Country \_\_\_\_\_

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Country \_\_\_\_\_

Name of Team to be Hosted \_\_\_\_\_ Age Division \_\_\_\_\_ M / F (circle one)  
Country \_\_\_\_\_

Name of Team to be Hosted \_\_\_\_\_ Age Division \_\_\_\_\_ M / F (circle one)  
Country \_\_\_\_\_

\*Attach a separate sheet for additional teams

Tournament/Games Director's Signature [Signature] Date 2-16-13

**Team Names Must Be Submitted 30 Days Prior to Tournament**

### APPROVAL

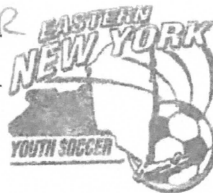
(FOR OFFICE USE ONLY)

U.S. SOCCER FEDERATION, INC.

By Nicole Ward

Title REGISTRATION COORDINATOR

Date 3/29/2013



FOR HOSTING ORGANIZATIONS AFFILIATED WITH U.S. SOCCER FEDERATION ONLY

I certify that your tournament has been approved for domestic team participation.

By Joann M Roth

Title office

USSF Org. Member \_\_\_\_\_

Date 2/27/2013

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.