



Washington Youth Soccer



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Tammy@wsysa.com

2008-2009

WASHINGTON YOUTH SOCCER

APPLICATION FOR TOURNAMENT SANCTION

COMPETITIVE DEVELOPMENTAL SELECT RECREATIONAL JAMBOREE
 U-17 to U-19 * U10 ONLY

Name of Tournament CLASH AT THE BORDER

Tournament Dates JUNE 25, 26, 27 & 28, 2009

Gender: Boys Girls

Ages: U- 10 - U19

Teams Participating will be invited from:

- Competitive - Premier Division I, II, III and WSYDL
- Select District, Inter District Leagues, Commissioners Youth League
- Recreational U10 ONLY
- ~~Jamboree~~ U10 and below
- Other State Associations
- Foreign Teams
- Friendly Games Only

Entry fee: \$ 545 (U19-U12)
\$445 (U11)
\$345 (U10)

Source of referees CSRA Referee
 District 5 Member Association EAST COUNTY ASSOC. Club FC VANCOUVER
 Tournament Director KEVIN SMITH
 Legal name KEVIN SMITH RMA # 308025 Date of Birth 05-26-1965
 Address 14715 NW 7th PLACE City VANCOUVER Zip 98685
 Phone 609 901-7043 Email Address tournamentdirector@fcvancouver.com
 Web site fcvancouver.com

Tournament Deadline JUNE 15, 2009

"Washington Youth Soccer Rules of Competition" will apply unless modified and approved by appropriate Washington Youth Soccer Board member(s). If modified, please attach modifications to this application. **ALL PLAYERS MUST BE INSURED.** Per Washington Youth Soccer Rule 207 (a) All players under the jurisdiction of Washington Youth Soccer (includes Member Associations and Districts) must be insured through Washington Youth Soccer before being allowed to participate in any Washington Youth Soccer activities.

TOURNAMENT DIRECTOR SIGNATURE:

(Signature indicates that you have read the above statement and will adhere to these rules)

ASSOCIATION APPROVAL

[Signature] President, BCYSA 2/3/09
 Name Title Date

DISTRICT APPROVAL

[Signature] VP of Competition 2/3/09
 Name Title Date

STATE VP APPROVAL

[Signature] VP Camp 3/16/09
 Name Title Date

STATE PRESIDENT

[Signature] President 3/16/09
 Name Title Date

**2008-2009
Washington Youth Soccer
Tournament Hosting Agreement**

(Addendum to U S Youth Soccer Tournament/Games Hosting Agreement)

In consideration of permission being granted to FC VANCOUVER (Host Association) to hold a tournament at Camas (city) WA on the dates of JUNE 25-28, we hereby agree that as the Tournament Host Organization we will, in addition to the US Soccer Hosting Agreement, abide by the following:

CREDENTIAL CHECKS

We agree that we shall conduct credential checks to ensure that:

1. All players are registered with U S Soccer or other affiliated organizations (ex: AYSO, USYS, YMCA).
2. All out of state and foreign teams present approved application to travel from the appropriate authority.
 - (a) Out of state teams must have their State Organization Member approval.
 - (b) All foreign teams must show USYS approval as well as approval from their Federation Organization Member.
3. All foreign team players must present picture identification cards issued by the team's Federation Organization Member

POST TOURNAMENT REPORT

We agree that we shall file a Tournament Report with the National State Association (Washington Youth Soccer) granting us permission to host this tournament, within thirty (30) days of the conclusion of the tournament. We understand that failure to file the report shall preclude the tournament host from receiving sanction for the following seasonal year until the report is filed. The Tournament Report shall include the following information:

1. The number of teams participating in each age division.
2. The name of the champion for each division, if a champion is determined.
3. If "Sportsmanship Awards" are given, indicate the criteria for the award and to whom they were given.
4. The number of fields used for the tournament.
5. The name of the tournament sponsor, if any.

DISCIPLINARY COMMITTEE

We agree that we shall appoint a Disciplinary Committee and that all cards issued will be written up on the Misconduct Report Form with punishments per Washington Youth Soccer Rule 605. All misconduct reports and Tournament Disciplinary Committee minutes will be sent to the Washington Youth Soccer Disciplinary Director, via the Washington Youth Soccer office within 48 hours of the completion of the tournament. We have selected a Disciplinary Committee Chair for the tournament:

Legal Name George Reynolds
Date of Birth 7/22/58 RMA # 752882
Street 603 NW 108th
City Vancouver State WA Zip 98685
Phone (360) 713-3209
E-Mail george.reynolds@andritz.com

REFEREE ASSIGNOR

We agree that in accordance with USSF Bylaw 532, we shall use only USSF registered referees who are in good standing for all tournaments games, and shall utilize one or three referee systems utilizing the diagonal system of ~~control~~. We intend to use a three referee system for the following age divisions: _____

U10-U19. The referee assignor for the tournament is:

Legal Name William H. Allison, Jr
Date of Birth 1/15/1964 RMA # 32003
Street 12611 NE 99th St, D22
City Vancouver State WA Zip 98682
Phone (360) 910-2479
E-Mail: oscrabill@yahoo.com



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 CLASH AT THE BORDER Website URL: www.fevancouver.com

Hosting Organization FC VANCOUVER Type of Tournament: Select Recreational Select & Rec

Designate Official of Hosting Organization KEVIN SMITH Title TOURNAMENT DIRECTOR Phone 360 901-7043 W

Address 14715 NW 7th PLACE Email TOURNAMENTDIRECTOR@FEVANCOUVER.COM Phone () _____ H

City VANCOUVER State WA Zip Code 98685 Phone () _____ FAX

State Association or Affiliate WSUSA Guest Referees Applications Accepted Yes No

Location of Tournament or Games CANAS, WA TEAM ENTRY DEADLINE: JUNE 15 - 2009

Date(s) of Tournament or Games JUNE 25, 26, 27 & 28 2009 Estimated # of Teams 120

Tournament or Games Director or Contact Person Kevin Smith Phone 360 901-7043 W

Address 14715 NW 7th PLACE Email TOURNAMENTDIRECTOR@FEVANCOUVER.COM Phone () _____ H

City VANCOUVER WA State WA Zip Code 98685 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-19 8/11 90	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60-90	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-18 8/11 91	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60-90	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-17 8/11 92	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60-90	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-16 8/11 93	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	60-90	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-15 8/11 94	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	50-80	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-14 8/11 95	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	50-70	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-13 8/11 96	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	50-70	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-12 8/11 97	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	18	5	50-60	11	<input checked="" type="checkbox"/>	3	545	<input type="checkbox"/>
U-11 8/11 98	"	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50-60	9	<input checked="" type="checkbox"/>	3	445	<input type="checkbox"/>
U-10 8/11 99	RT, S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3	40-50	6	<input checked="" type="checkbox"/>	3	345	<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: WSUSA, OYSA, IYSA, OYSA, USCW
- International Teams as listed: CONCACAF

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 02-02-09

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE Washington Youth Soccer

Date 3/16/09

By

Title VP Camp



US Youth Soccer

TOURNAMENT OR GAMES HOSTING AGREEMENT

In consideration of permission being granted to FC Vancouver to hold a tournament or games at FC Vancouver Camas WA
 (Hosting Organization) (City) (State)

On the dates of June 25-28, 20 09, we agree to the following conditions:

ABIDE BY RULES: We shall abide by all statements made in our approved US Youth Soccer *Application to Host A Tournament or Games*, in our tournament invitation, in our tournament rules, in the US Youth Soccer *Travel and Tournament Policy* and in this US Youth Soccer *Tournament or Games Hosting Agreement*. We agree that all decisions regarding acceptance of teams into a tournament shall be fairly and impartially made and shall not be based upon race, creed, color or national origin and that we will not advertise by any means the tournament or games until all approvals are received.

INVITATIONS: The tournament or games approval form shall accompany all tournament or games invitations distributed.

HOUSING: We agree that we will not require a team to use only accommodations approved or provided by the hosting organization or other organization, unless disclosure is made on the tournament application form of the required hotel/motel names and the guaranteed rates.

PROCURING LIABILITY INSURANCE: We have procured liability insurance coverage for the tournament or games with limits of not less than \$1,000,000/\$2,000,000 which names the State Association or Affiliate with which the Hosting Organization is a member. A copy of the certificate of insurance, IF REQUIRED, is attached issued by _____

REQUIRING MEDICAL AUTHORIZATIONS: We shall require all teams participating in the tournament or games to provide medical releases for each player in an appropriate form. These authorizations shall be reviewed by the Hosting Organization at registration and kept in the possession of a team official

ADVANCE PUBLICATION OF RULES: We agree that our tournament or games rules shall be included with the invitation sent to each team and shall, again, be published to all teams accepted prior to the start of the tournament/games.

CREDENTIALS CHECKS: We agree that we shall conduct credentials checks to ensure that all players are registered with US Youth Soccer or US Soccer or a member thereof or their national association, properly rostered with their team, and participating in accordance with representations set forth on the US Youth Soccer *Application to Host a Tournament or Games*. We agree that we will not modify or mark in any way original rosters or member passes; and will not register any player, coach, or team official or issue any member pass.

USE OF US SOCCER REGISTERED REFEREES: We agree that we shall use for all games only US Soccer registered referees who are in good standing (unless US Soccer has granted a waiver to allow the use of authorized referees from another country), and shall use a one- or 3-referee system. We intend to use a 3-referee system for the following age groups: All Age Groups Participat. There will be an adequate number of US Soccer registered referees available in the area during the tournament or game dates to cover the scheduled games. We have selected the following assignor to assign referees for the tournament or games (NOTE: ONLY US Soccer certified assignors may be used.):

Name William H. Ainsont, Jr Phone 360 910-2479 W
 Address 12611 NE 99th St, D22 Email OSCRE@villco Phone () _____ H
 City Vancouver State WA Zip 98682 Yanco.com Phone () _____ Fax

AVAILABILITY OF POLICE AND RESCUE SERVICE: We have notified the local police, ambulance, and emergency rescue services of the date of the tournament or games and the times and fields which will be used for games, and have been advised by them that they will be available to render assistance if needed. We will use the following method(s) of contacting emergency services
All Cell Phone Call

TOURNAMENT OR GAME RULES - BEHAVIOR: We agree that our tournament or game rules contain provisions ensuring that the behavior of teams, players, coaches, and spectators is appropriately controlled, including specific provisions that—

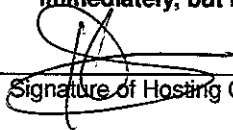
- Spell out the disciplinary measures to be imposed for the issuance of red and yellow cards or other improper conduct;
- indicate what procedures will be followed regarding protests and appeals;

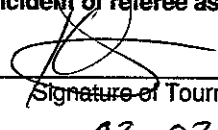
- indicate that all disciplinary measures imposed by hosting organizations shall be limited to placing restrictions upon an individual's group participation in the tournament/games;
- record the issuance of all red and yellow cards and other matters involving the conduct of a team, its players, coaches, and supporters and also report them immediately to the home State Association and the home club/league of the team; and
- state that the home State Association or member thereof and the home club or league shall, except in the case of referee assault or abuse, have the responsibility for imposing, should circumstances warrant, additional penalties within their respective jurisdictions with regard to any matters arising from the tournament or games.

TOURNAMENT CANCELLATION: We agree that our tournament or game rules shall state what refunds, if any, shall be made to participating teams if all or a portion of the tournament or games is cancelled by the hosting organization for any reason.

POST TOURNAMENT OR GAMES REPORT: We agree that we shall file any required Post Tournament or Games Report with the State Association or Affiliate granting us permission to host this tournament or games within 30 days after the conclusion of the tournament or games. We understand that failure to file the report may preclude the tournament/games host from receiving approval for any tournament/games for the following seasonal years until the report is filed. The Post Tournament or Games Report shall include the following information:

- the number of teams participating in each age group (boys and girls);
- if a champion is determined, the name of the champion for each group;
- the number of teams from each State Association, Affiliate, other Organization Member, or foreign country;
- if "Sportsmanship Awards" are given, the criteria for the award and to whom awards were given;
- the number of fields used for the tournament/games;
- the name of the sponsor, if any; and
- the names and teams of all players issued red and yellow cards, and details of any other matters involving the improper or unsporting conduct of a team, its players, coaches or supporters. **NOTE: Any incident of referee assault or referee abuse by a player, coach, manager, club official, or game official must be reported to the alleged offender's home State Association, or member thereof immediately, but in no event later than 48 hours after an incident of referee assault or abuse..**


 Signature of Hosting Organization Designated Official
 02-02-09
 Date


 Signature of Tournament or Games Director
 02-02-09
 Date

Hosting Organization FCVANCOUVER Phone 360-608-8073
 Address PO Box 873055 Email TournamentDirector@fcvancouver.com Phone 360-901-7043 W
 City Vancouver State WA Zip 98687-3055 Phone () _____ H
 Fax () _____

Tournament or Games Headquarters FCVANCOUVER Phone 360-901-7043 W
 Address PO Box 873055 Email TournamentDirector@fcvancouver.com Phone () _____ H
 City Vancouver State WA Zip 98687-3055 Phone () _____ Fax



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 CLASH AT THE BORDER

Hosting Organization FC VANCOUVER

State Association/or Sectional Director _____

Location (City) of Tournament/Games CANAS State WA

Date(s) of Tournament/Games JUNE 25-28, 2009 Estimated # of Foreign Teams _____

Tournament/Games Director/Contact Person KEVIN SMITH Telephone Work 206 901-7043 Ext. _____

Address 14715 NW 7th Place Telephone Home () _____

City VANCOUVER State WA Zip 98685 Fax () _____

Foreign Teams to be Hosted

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 _____		
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 _____ Date 02/03/09

Team Names Must Be Submitted 30 Days Prior to Tournament

APPROVAL

(FOR OFFICE USE ONLY)

U.S. SOCCER FEDERATION, INC.

By _____

Title _____

Date _____

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

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

By James Andrea

Title President

USSF Org. Member WSYSA

Date 3/16/09

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.