



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 Columbia County Spring Shootout Website URL: www.BullsRushFC.com  
 Hosting Organization Midstate District - Bulls Rush FC Type of Tournament: ☐ Select ☐ Recreational ☒ Select & Rec  
 Designate Official of Hosting Organization Andrew Hammer Title Director of Coaching Phone (706-550-2858) W  
 Address 3685 Riverwatch Parkway Ste 145 Email bullsdoc12@gmail.com Phone ( ) \_\_\_\_\_ H  
 City Martinez State GA Zip Code 30907 Phone ( ) \_\_\_\_\_ FAX  
 State Association or Affiliate SCYS Guest Referees Applications Accepted ☐ Yes ☐ No  
 Location of Tournament or Games Columbia County, GA TEAM ENTRY DEADLINE: 1-16-2024  
 Date(s) of Tournament or Games January 24-25, 2024 Estimated # of Teams 75  
 Tournament or Games Director or Contact Person Andrew Hammer Phone (706-550-2858) W  
 Address 3685 Riverwatch Parkway Ste 145 Email bullsdoc12@gmail.com Phone ( ) \_\_\_\_\_ H  
 City Martinez State GA Zip Code 30907 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 1/1/	S1, S2, S3, S4, RT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 9 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 10 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	5	50	7	<input checked="" type="checkbox"/>	3	600	<input type="checkbox"/>
U- 11 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	650	<input type="checkbox"/>
U- 12 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	5	60	9	<input checked="" type="checkbox"/>	3	650	<input type="checkbox"/>
U- 13 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	700	<input type="checkbox"/>
U- 14 1/1/		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	5	70	11	<input checked="" type="checkbox"/>	3	700	<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: \_\_\_\_\_

☐ 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

**APPROVED**

Date 7/8/2025

## APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

SC YOUTH SOCCER

By

W. Blanton

Date 7/8/2025

Title EXECUTIVE DIRECTOR