

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

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games		Nordic Cup 2024		Website URL:		www.nordicsoccer.org	
Hosting Organization		Nordic Soccer Club		Type of Tournament:		<input checked="" type="checkbox"/> Select <input type="checkbox"/> Recreational <input type="checkbox"/> Select & Rec	
Designate Official of Hosting Organization		Jim Goudie		Title		Club Director	
Address		PO Box 674		Email		jim@nordicsoccer.org	
City		Essex Junction		State		VT	
Zip Code		05453		Phone ()			
State Association or Affiliate		Vermont Soccer Association		Guest Referees Applications Accepted		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Tournament or Games		Essex, Colchester, Hinesburg, S.Burlington		TEAM ENTRY DEADLINE:		May 3, 2024	
Date(s) of Tournament or Games		June 15-16, 2024		Estimated # of Teams		180	
Tournament or Games Director or Contact Person		Jim Goudie		Phone		802-999-7653	
Address		PO Box 674		Email		jim@nordicsoccer.org	
City		Essex Junction		State		VT	
Zip Code		05453		Phone ()			

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-	10	1/1/	14	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	14	3	50 Minutes	7	<input checked="" type="checkbox"/>	3	\$850.00	<input type="checkbox"/>
U-	11	1/1/	13	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	50 Minutes	9	<input checked="" type="checkbox"/>	3	\$900.00	<input type="checkbox"/>
U-	12	1/1/	12	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	3	50 Minutes	9	<input checked="" type="checkbox"/>	3	\$900.00	<input type="checkbox"/>
U-	13	1/1/	11	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>
U-	14	1/1/	10	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>
U-	15	1/1/	09	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>
U-	16	1/1/	08	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>
U-	17	1/1/	07	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>
U-	18	1/1/	06	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>
U-	19	1/1/	05	S1, S2, S3, S4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	22	3	60 Minutes	11	<input checked="" type="checkbox"/>	3	\$950.00	<input type="checkbox"/>

- ☐ **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

Robert J. Knatal

Date 1/31/24

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE Vermont Soccer Association Date 1/31/2024

By Meg Munson Title Executive Director