

## 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 Womens Blue Chip Showcase							Website URL: https://kingshammersbd.com/tournaments-					
								: Select		Recreational	☐ Selec	t & Rec
Designate Official of Hosting Organization John Ruffolo Title									F	Phone (513) 5	576-9555	W
Address OSA Email office@osysa.com Phone (513) 576-9555											— н	
City	Mainevill								Phone		FAX	
State	Association or					· ·		erees Application	s Accepted	☐ Yes		<del></del> No
	tion of Tournam					KY		M ENTRY DEAD	·		_	
Date(s) of Tournament or Games 04/17/2026 - 04/19/2026								Estimated # of T	22	0		
Tournament or Games Director or Contact Person Lisa Mc					cIver					hone (214) 22	23-1295	W
Address 50 E Rivercenter Blvd					lmciver@kingshammersbd.c					hone		— :: Н
City Covington					tate KY	7in (	Tip Code 41011-1683			hone		— ··· FAX
Ac	Groups cepted	Type(s) of Team Accepted	В	G	Roster Size	# Guest Players Allowed	Length Of Games	# Players on Field	Awards	Mininimum # of Games	Fee	Bond
S1	U13	Elite	1	X	22 22	5	70	11	X	3	\$1200	
S1 S1	U14	Elite	-	X		5	70	11	X	3	\$1200	
	U15	Elite	+	X	22	5	80	11	-	3	\$1695	
S1	U16	Elite	+	X	22	5	80	11		3	\$1695 \$1695	
S1 S1	U17 U18	Elite Elite	+	X	22	5	80	11	<del> </del>	3	\$1695	
S1	U19	Elite	+	X	22	5	80	11		3	\$1695	
51	017	Ente		- 11							φ10/3	
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			+									
										<u></u>	<u></u>	
	□ R	of types of teams and tournaments  T RESTRICTED TOURNAMENT -O  eam will be restricted to teams within  T UNRESTRICTED TOURNAMENT	pen onl	y to me	embers of US	Youth Soccer an	Teams will be i	ciations. nvited from all US	S Youth Stat	te Associations/ <i>l</i>	Affiliates only.	
	**	ternational eams as listed:										
	AGRE	osting Organization agrees to be bour EMENT and all applicable rules of the re of Designated Official of Hosting ation	-		ate Associatio				S HOSTING	3 Date	e	
	· ·											
		ROVAL										
(For Official Use Only)STATE Ohio Soccer Association  ASSOCIATION OR AFFILIATE Dai								Date				
6.111								Т:11-	State Commissioner			
_	= APPI	By						Title				