



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 Pueblo Rangers Showcase Website URL: showcase.com
 Hosting Organization Pueblo Rangers Soccer Club Type of Tournament: Select Recreational Select & Rec
 Designate Official of Hosting Organization Cobea Becker Title Tournament Director Phone () 719-680-8204 W
 Address 635 W. Corona Street, Suite 113 Email rangerstournaments@gmail.com Phone () _____ H
 City Pueblo State CO Zip Code 81004 Phone () _____ FAX
 State Association or Affiliate Colorado Soccer Association Guest Referees Applications Accepted Yes No
 Location of Tournament or Games Langoni Soccer Complex TEAM ENTRY DEADLINE: November 1, 2023
 Date(s) of Tournament or Games November 11-12 Estimated # of Teams 24
 Tournament or Games Director or Contact Person Cobea Becker Phone () 7196808204 W
 Address same as above Email _____ Phone () _____ H
 City _____ State _____ Zip Code _____ 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- 14 1/1/	S1, S2, S3, S4, RT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	105 min	22	<input type="checkbox"/>	3	\$625	<input type="checkbox"/>
U- 15-16 1/1/	S1, S2, S3, RT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	105 min	22	<input type="checkbox"/>	3	\$625	<input type="checkbox"/>
U- 17-19 1/1/	S1, S2, S3, S4, RT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	4	105 min	22	<input type="checkbox"/>	3	\$625	<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"/>
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"/>
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 /s/Cobea Becker Date 4-21-23

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

By Colorado Date 4/24/23
[Signature] Title Outreach Coordinator