

**34TH ANNUAL
SILVER STATE INVITATIONAL
TOURNAMENT APPLICATION**

TEAM NAME: _____ AGE GROUP: _____ MALE / FEMALE

CLUB NAME: _____ LEAGUE: _____

STATE AFFILIATION: _____

UNIFORM COLORS: Shirt: _____ Shorts: _____ Socks: _____ Alternate: _____

COACH: _____ TELEPHONE: () _____

MANAGER: _____ TELEPHONE: () _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

CELL PHONE: () _____ EMAIL: _____

LEAGUE RECORD: _____ LEVEL: _____

DIVISION PLACEMENT REQUEST (FLIGHT Gold/Silver/Bronze): _____

TOURNAMENTS: _____ RECORD: _____ LEVEL _____

TOURNAMENTS: _____ RECORD: _____ LEVEL _____

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DID YOU PLAY IN STATE CUP 2007? _____ RECORD: W__ L__ T__ PLACE: _____

DID YOU PLAY IN REGIONALS 2007? _____ RECORD: W__ L__ T__ PLACE: _____

Signature _____ Date _____

Signature on application is required for tournament entry and constitutes acceptance of tournament guidelines, format, Tournament Rules and Release of Liability.

FOR TOURNAMENT USE ONLY:

Date Rcvd: _____ Check #: _____ Amount: \$ _____ Date Entered: _____

Date Acceptance Letter emailed: _____

NOTES: _____

Must put **accurate** phone numbers / email addresses, **NOT** just the Club office or DOC / Presidents information.
Please direct any questions you may have regarding the 2008 Silver State Invitational Tournament to the
USYSNV office at 702-870-3024.

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**DATES: U11 THRU U14 B&G
JANUARY 26&27, 2008
APPLICATION DEADLINE: DECEMBER 10, 2007**

**DATES: U15 THRU U19 B&G
FEBRUARY 23&24, 2008
APPLICATION DEADLINE: JANUARY 15, 2008**

**ENTRY FEE 2008: \$550.00 Per Team
Make checks payable to: USYSNV
No refunds for teams withdrawing after acceptance notification**

**AWARDS: 1ST and 2ND Place awards.
Tournament pins and programs for all players.**

**FORMAT: US Youth Soccer and FIFA rules; 3 game minimum (If possible).
Younger age groups will play 30-minute halves with regulation finals.
Older age groups will play 35-minute halves with regulation finals.
Schedules posted on USYSNV.NET (Subject to change up to match time).**

**CHECK IN: Mandatory: Friday night prior to tournament 6:00 pm - 9:00 pm
Location: La Quinta Hotel
7101 Cascade Valley Court
Las Vegas, Nevada 89128**

SEND APPLICATION AND ENTRY FEE TO:

**Nevada Youth Soccer Association (USYSNV)
2626 S. Rainbow Blvd. #103
Las Vegas, Nevada 89146**

FOR ADDITIONAL INFORMATION PLEASE CALL: (702) 870-3024

**Andrea Thompson
Nevada Youth Soccer Association / United States Youth Soccer of Nevada (USYSNV)
Web Address: www.USYSNV.NET
Email: USYSNV@aol.com**

Please fill in application 'completely', 'accurately' and 'legibly'!
Application must be signed by Team Official to be considered for SSI.
Read SSI Tournament Rules to clarify Team / Team Officials responsibilities.
Acceptance Letters will be Emailed to the team manager listed on the application.