

APPLICATION TO HOST A DISTRICT VI EVENT

Hosting League & Club: _____ Event Dates: _____

Name of Event: _____

Event Director: _____

Director's Address: _____

City and Zip Code: _____

Phone Number: _____ Fax Number: _____

E-Mail: _____

Guest Players: Y___ N___ Referees Supplied By: _____

Indicate Number of Teams Requesting by Age Group and Division

	Division 1	Division 3	Division 4	Total
BOYS				
U-10				
U-11				
U-12				
U-13				
U-14				
U-15				
U-16				
U-17				
U-18				
U-19				
GIRLS				
U-10				
U-11				
U-12				
U-13				
U-14				
U-15				
U-16				
U-17				
U-18				
U-19				
GRAND TOTAL				

Total Number of Teams Requested: _____ Proposed Entry Fee: \$ _____

Signature of League President: _____

Signature of District Commissioner: _____

*Note: Only teams and players from District VI are allowed to compete in a District VI event. No out of state teams or players.