

Please Type or Print Clearly – Do Not Staple

## APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games		Penn Fusion Boys Winter Showcase		Website URL:		<a href="https://www.sidelinesoccersolutions.com/events-connector/penn-fusion-boys-winter-showcase">https://www.sidelinesoccersolutions.com/events-connector/penn-fusion-boys-winter-showcase</a>	
Hosting Organization		Penn Fusion SA		Type of Tournament:		<input checked="" type="checkbox"/> Select <input type="checkbox"/> Recreational <input type="checkbox"/> Select & Rec	
Designate Official of Hosting Organization		Mark Thomas		Title		Executive Director	
Address		901 S. Belmar Street, Suite P		Email		mthomas@pennfusion.org	
City		West Chester		State		PA	
Zip Code		19382		Phone ( )		215-801-4726	
State Association or Affiliate		Eastern Pennsylvania Youth Soccer		Guest Referees Applications Accepted		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Tournament or Games		Conshohocken, PA		TEAM ENTRY DEADLINE:		December 1, 2025	
Date(s) of Tournament or Games		February 21 - 22, 2026		Estimated # of Teams		240	
Tournament or Games Director or Contact Person		Joe Levan		Phone ( )		484-678-1432	
Address		224 County Line Road		Email		JLevan@sidelinesoccersolutions.com	
City		Wayne		State		PA	
Zip Code		19087		Phone ( )		215-801-4726	

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-	15	1/1/	10	UT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	1295	<input type="checkbox"/>
U-	16	1/1/	09	UT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	1295	<input type="checkbox"/>
U-	17	1/1/	08	UT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	1295	<input type="checkbox"/>
U-	19	1/1/	06	UT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22	5	80	11	<input type="checkbox"/>	2	1295	<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: US Club Soccer, AYSO, SAY, USAAA, USL, Canada
- ☐ 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

Mark Thomas  
Mark Thomas (Dec 4, 2025 14:08:13 EST)

Date 12/04/2025

## APPROVAL

(For Official Use Only)STATE  
ASSOCIATION OR AFFILIATE

Eastern Penna Youth Soccer Assoc.

Date 12/12/2025

By Leo Kelly

Title Director of Operations