



Post Tournament or Games Report

(per US Youth Soccer Travel and Tournament Policy)

BOLD items are required

(Due within 30 days post conclusion of event)

Event Name: _____

Club: _____ **Date(s):** _____

Event Director: _____ **Tel:** _____

Email: _____

Level of Sanctioning (please check):

Festival/Jamboree

MYSA Only

National

International

Other _____ (i.e. 3 v 3)

Number of teams participating in each age group by gender:

Boys

Girls

U9 _____

U9 _____

U10 _____

U10 _____

U11 _____

U11 _____

U12 _____

U12 _____

U13 _____

U13 _____

U14 _____

U14 _____

U15 _____

U15 _____

U16 _____

U16 _____

U17 _____

U17 _____

U18 _____

U18 _____

U19 _____

U19 _____

Name of Champion for each group, if awards given:

Boys

Girls

U11 _____

U11 _____

U12 _____

U12 _____

U13 _____

U13 _____

U14 _____

U14 _____

U15 _____

U15 _____

U16 _____

U16 _____

U17 _____

U17 _____

U18 _____

U18 _____

U19 _____

U19 _____

The number of teams from each state association, affiliate, other organization member or foreign country.
Does not apply to MYSA only tournaments (please attach sheet if extra space is required):

Association	Quantity	Association	Quantity

Number of fields used for games: _____

Sportsmanship awards given (please check):

YES [attach criteria, list name of recipient(s)]

NO

Name of Sponsor (if applicable): _____

The following all require hard copy submittals:

- Names and teams of all players receiving yellow and red cards and details of any other matters involving the improper or unsportsmanlike conduct of a team.
(In Minnesota, yellow card documentation is unnecessary for MYSA teams, but required within 30 days for players/teams from out of state and foreign countries)
- All red-carded player passes, ejection code and game reports must be turned in and reported within 48 hours to MYSA.
- Statement regarding incident of referee assault must be reported immediately and no later than 48 hours post event.
- Referee Assignor Report is due within 30 days of end of event.

Additional Comments (please attach sheet if extra space is required):

Name of person completing report: _____

Tel: _____ Email: _____