



Please Type or Print Clearly - Do Not Staple

APPLICATION TO HOST A TOURNAMENT OR GAMES

Name of Tournament or Games City Legacy Cup 2026
Website URL: www.h-townsocceracademy.org/citylegc
Hosting Organization City of Houston
Type of Tournament: Select Recreational Select & Rec
Designate Official of Hosting Organization Juan Briones Title President
Address 2001 Central st Email president@houstonyouthsoc
City Houston State TX Zip Code 77017
State Association or Affiliate STYSA
Location of Tournament or Games Cullen Park, Memorial Park
Date(s) of Tournament or Games May 23-25th 2026
Tournament or Games Director or Contact Person Adrian Juarez
Address 2001 Central St. Email adrian.juarez@houstontx.gov
City Houston State TX Zip Code 77017

Table with 13 columns: 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. Rows include age groups from U-19 to U-8 with various team types and fees.

*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.
UT UNRESTRICTED TOURNAMENT Other US Soccer Members as listed: US Club
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

[Handwritten signature]

Date 1/26/26

APPROVAL

(For Official Use Only) STATE ASSOCIATION OR AFFILIATE

South Texas Youth Soccer

Date 1/26/2026 3-10-26

By

[Handwritten signature]

Title

Executive Director