



June 15, 2010

GEORGE WOONS  
11 TIBBLES LANE  
ROCHESTER, NY 14624

**RE: GATES TRAVEL SOCCER TOURNAMENT & FESTIVAL**

Dear GEORGE WOONS,

Please find enclosed your approved application to host the GATES TRAVEL SOCCER TOURNAMENT & FESTIVAL.

The foreign team invited must supply you with a copy of an approval from their National Association to travel for entry into the tournament.

Best wishes for a successful event.

Sincerely,

A handwritten signature in cursive script, which appears to read 'Blake Ewing'. The signature is written in dark ink and is positioned above the printed name.

Blake Ewing  
Manager of Registration



**U.S. Soccer Federation, Inc.**  
APPLICATION TO HOST A TOURNAMENT OR GAMES INVOLVING FOREIGN TEAMS (HAPP 3-03)

Affiliated with the Federation Internationale de Football Association

*(Handwritten initials)*

Please Type or Print Clearly

Please Type or Print Clearly

Name of Tournament or Games GATES TRAVEL SOCCER TOURNAMENT + Festival  
 Hosting Organization Gates Youth Soccer Inc  
 State Association/for Sectional Director NYSWYSA  
 Location (City) of Tournament/Games Gates State NY  
 Date(s) of Tournament/Games 7-17 + 7-18 2010 Estimated # of Foreign Teams 30  
 Tournament/Games Director/Contact Person George Waens Telephone Work (585) 520-2439 Ext. \_\_\_\_\_  
 Address 11 Tibbles Lane Telephone Home (585) 370-2537  
 City Rochester State NY Zip 14624 Fax (707) 967-0525

Foreign Teams to be Hosted

Name of Team to be Hosted Ancaster Age Division VARIOUS  M  F (circle one)  
 Country CANADA

Name of Team to be Hosted MT Hamilton Age Division VARIOUS  M  F (circle one)  
 Country CANADA

Name of Team to be Hosted Whitby Age Division VARIOUS  M  F (circle one)  
 Country CANADA

Name of Team to be Hosted ALAX Age Division VARIOUS  M  F (circle one)  
 Country CANADA

*\* ATTACHED*

\*Attach a separate sheet for additional teams

Tournament/Games Director's Signature *(Signature)* Date 5-29-10

**Team Names Must Be Submitted 30 Days Prior to Tournament**

**APPROVAL**

(FOR OFFICE USE ONLY)

U.S. SOCCER FEDERATION, INC.  
 By *(Signature)*  
 Title *(Signature)*  
 Date 6/15/2010

FOR HOSTING ORGANIZATIONS AFFILIATED WITH U.S. SOCCER FEDERATION ONLY

I certify that your tournament has been approved for domestic team participation.

By *(Signature)*  
 Title Assistant  
 USSF Org. Member NYSWYSA  
 Date 6/2/10

*In granting this permission to host a tournament or games, U.S. Soccer shall NOT be liable for transportation, lodging or injury to persons or property sustained in the course of the sanctioned event.*