

## KANSAS STATE YOUTH SOCCER ASSOCIATION POST TOURNAMENT REPORT

TOURNAMENT: \_\_\_\_\_

DATES: \_\_\_\_\_

HOST ORGANIZATION: \_\_\_\_\_

TOURNAMENT DIRECTOR: \_\_\_\_\_

PHONE: \_\_\_\_\_

*A tournament report must be filed with Kansas State Youth Soccer Association (KSYSYA), the sanctioning body that granted permission to host this tournament, within thirty (30) days after the conclusion of the tournament. Failure to file a report within thirty (30) days will result in a \$25 late fee and KSYSYA withholding sanctioning for any tournament for following seasonal years until the report is filed.*

**Number of teams participating in each age division (boys and girls)**

AGE	BOYS	GIRLS	AGE	BOYS	GIRLS
U8			U14		
U9			U15		
U10			U16		
U11			U17		
U12			U18		
U13			U19		

**If a champion is determined, the name of the champion for each division**

Division: \_\_\_\_\_

AGE	BOYS	GIRLS	AGE	BOYS	GIRLS
U8			U14		
U9			U15		
U10			U16		
U11			U17		
U12			U18		
U13			U19		

Division: \_\_\_\_\_

AGE	BOYS	GIRLS	AGE	BOYS	GIRLS
U8			U14		
U9			U15		
U10			U16		
U11			U17		
U12			U18		
U13			U19		

**Number of teams from each State Association or Foreign Country**

State Association	# Teams	State Association	# Teams	State Association	# Teams	Foreign Country	# Teams

**If “Sportsmanship Awards” are given, the criteria for the award and to who awards were given:**

Criteria:

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AGE	BOYS	GIRLS	AGE	BOYS	GIRLS
U8			U14		
U9			U15		
U10			U16		
U11			U17		
U12			U18		
U13			U19		

**Number of fields used for the tournament**

Small Sided: \_\_\_\_\_

Full Size: \_\_\_\_\_

**Tournament sponsors (if any)**

Name(s): \_\_\_\_\_

**Coach and player ejections**

Individual	Team	Age	Gender	State Association	Infraction	Served Yes/No

*If additional cards were given, please list all information on a separate sheet.*

Were there any additional matters involving the improper or unsporting conduct of a team, its players, coaches, or supporters? \_\_\_\_\_ If so, please list below, or attach a separate report.

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**NOTE: Any incidents of ejections in a final game, or any incidents of referee abuse or referee assault, or other incidents of a serious nature must be reported immediately to the home State Association of the player, coach, or team but no later than seven (7) days after the conclusion of the tournament.**

**Post Tournament Fees**

Competitive Teams: \$5 x \_\_\_\_\_ teams = \$ \_\_\_\_\_

Recreational Teams: \$2 x \_\_\_\_\_ teams = \$ \_\_\_\_\_

Minus Bond: \$ (150)

Total Amount Payable to KSYSA: \$ \_\_\_\_\_

Send Payment to:  
Kansas Youth Soccer 1945  
South Mahaffie Circle  
Olathe, KS 66062

\_\_\_\_\_  
\_\_\_\_\_  
Signature of Host Organization President

Signature of Tournament Director

\_\_\_\_\_  
\_\_\_\_\_  
Date

Date