



Associate Membership Renewal Short Term (10 Days or less) Event

ORGANIZATION INFORMATION	
Hosting Organization Name:	
Name of Tournament/Event:	
Organization Address:	
City & Postal Code:	
Organization Phone Number:	
Organization Email Address:	

TOURNAMENT/EVENT REGISTRAR (MAIN CONTACT) INFORMATION				
Name:				
Address:	City:	Postal Code:		
Home Telephone:	Mobile:			
Email:	Fax:			
Name of Discipline Chairperson:				
Phone:	Mobile:			
Email:	Fax:			
Name of Tournament Chairperson:				
Phone:	Mobile:			
Email:	Fax:			
Tournament:	Single Elimination	Double Elimination	Round Robin	Friendly Games
Tournament Start Date (mm/dd/yyyy):		End Date (mm/dd/yyyy):		
Entry Deadline (mm/dd/yyyy):		Entry Fee: \$		
Location:		Website:		
Venue(s):				

OPEN TO (please check <input checked="" type="checkbox"/>):						
Youth Teams				Adult (Senior) Teams		
AGE	BOYS	GIRLS	LEVELS	LEVEL	MALES	FEMALES
U6			Metro	U21		
U7			Gold	Division 1		
U8			Silver	Division 2		
U9			Bronze	Division 3		
U10			House	Division 4		
U11			Development	Premier		
U12			OTHER TEAMS			
U13				Over 35		
				OTHER TEAMS		
U14			Out-of-province		YES	NO
U15			USA	Out-of-province		
U16			International	USA		
U17				International		
U18						

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PLEASE STATE THE PRIMARY PURPOSE OF THE EVENT AND/OR TOURNAMENT

BC SOCCER RULES & REGULATIONS ACKNOWLEDGEMENTS	Please Check to Agree <input checked="" type="checkbox"/>
The Organization agrees to adhere to BC Soccer’s Rules & Regulations, including BC Soccer’s Small Sided Development Manual as applicable.	
The Organization understands it is responsible to submit complete data and payment for players participating via BC Soccer Short Term Event Player Permit ¹ 5 days prior to the tournament/event Start Date (and that the tournament/event may not maintain “sanctioned” status if The Organization fails to comply).	
The Organization agrees that only referees on BC Soccer’s Registered Referees list will be appointed to officiate.	

LISTING OF BOARD / STAFF / OFFICER / EXECUTIVE OF APPLYING ORGANIZATION (Minimum of 2 required to have signature)						
Position	Name	City & Postal Code	Primary Telephone	E-mail	Criminal Record Check on File (Yes or No)	Signature

FEES (Please provide payment for the Associate Membership Application and relevant tournament fees)	
Short Term Event Associate Membership Application Fee	\$100
Youth Tournament Fee	\$20
Adult Tournament Fee	\$50

¹ A BC Soccer Short-Term Event Player Permit enables a member organization the ability to permit individuals who are otherwise unregistered players to participate in a BC Soccer sanctioned tournament/event that lasts no longer than 10 days. The fee per player per permit is \$15. A form to collect BC Soccer Short Term Event Player Permit requests and participant information will be provided to the Tournament/Event Registrar (Main Contact) who is responsible to submit requests/participant information and fees a minimum of 5 days prior to the tournament’s start date.

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Please Check	Payment Method		
	Cheque (made payable to BC Soccer Association)		
	Cash	Debit (available at office only)	
	Credit Card (please provide information below or call to provide over the phone 604.299.6401)		
		Name as appears on the Credit Card:	
		Type of card (VISA or Mastercard only):	
		Credit Card number:	
		Credit Card expiry date (mm/yy):	Security code:
		Cardholder Signature:	
SUBMISSION INSTRUCTIONS			
Submit to the attention of:	Ryan McQuillan, Member Services Coordinator		
Submit via one of the following:	1) Mail	BC Soccer Association Office 250 – 3410 Lougheed Highway, Vancouver, BC, V5M 2A4	
	2) Email:	ryanmcquillan@bcsoccer.net	
	3) Fax:	604.299.9610	
OFFICE USE ONLY			
Received by:			Date:
Approved by Membership Committee	Yes	No	Date:
Approved by Board of Directors	Yes	No	Date:
Print name of board member or designate			
Signature of board member or designate			
Date:			