



OREGON ADULT SOCCER ASSOCIATION

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AFFILIATED LEAGUES:
Cascade Area Soccer Association
Cascade Collegiate Soccer League
Eastside Timbers
Greater Portland Soccer District
La Liga del Sur de Oregon
Metro PDX Soccer
Northwest United Women's Soccer
Oregon Coast Soccer League
Oregon Premier Soccer League
Portland Co-Ed Soccer League

Tournament Sanctioning Request Form

Today's Date: _____

Tournament Name: _____

Dates of Tournament: _____

Tournament Format: _____

Location of Tournament _____

Additional Information: _____

I certify that the above named tournament will follow all applicable OASA, USASA, USSF & FIFA rules, specifically including:

- a. All players will be registered with a USSF/FIFA affiliated entity such as OASA, OYSA, WSSA, etc.
- b. All referees will be registered with USSF, or if from outside the US, be given written permission to attend by their FIFA association.
- c. The referee assignor will be a USSF registered referee assignor.
- d. Each player will sign a waiver prior to playing and that the waiver will be approved by or provided by OASA prior to the event. And all players under 18 years old will also have a signed [Parental Waiver Form](#).
- e. All applicable permits (particularly field permits), and licenses will be obtained, and copies will be provided to OASA prior to the tournament.
- f. Within 7 days following the tournament, the tournament will provide a report to OASA. The report will include:
 - A list of all players who received a red card during the tournament, including player card number;
 - The waiver forms, including parental waivers, as noted in "d" above;
 - A written report from the referee of the game noting all injured players.
 - The report should also note the number of teams, team names and the name and contact information for the team managers.
 - Anything else of interest should also be noted.
 - The OASA may also require referee reports from each game. However, the tournament will be notified in advance should this requirement be necessary.

Signature: _____

Printed Name: _____

Email Address: _____

Phone: _____

Please send completed form to OASA via email, fax or mail.

You will be contacted regarding the acceptance of your request.