

REFEREE INFORMATION FORM

One per referee please. (Thanks in advance for your help!)
If you're working on the web, press the 'Send' Button at bottom to email.
Or copy and print and send to the address below.

Tournament: _____

a. Referee name: _____

b. Referee address: _____

c. Phone: _____ (home) (day): _____

d. Email: _____

e. Don't worry! If you are a coach, we will not schedule you to referee less than one hour before or after your team's games. If you are a parent, we will not schedule you for games in direct conflict with your team, and you cannot referee in the same flights. Please list name of team that you are with, if any.

f. **Team name(s):** _____ **Age Group:** _____ **Gender:** _____

g. Relationship to team (circle applicable categories): ___coach ___parent ___sibling-(age:_____) ___friend

____other (explain): _____

h. License Level: _____ Years of Referee Experience: _____

i. Playing experience: Last age group: _____

j. Experience...what do you feel comfortable with as a referee? Check the highest level(s) that apply, or that would you prefer.
Comments on level? _____

___U12 ___Girls ___Boys ___Center ___Line

___U14 ___Girls ___Boys ___Center ___Line

___U-16 ___Girls ___Boys ___Center ___Line

___U-19 ___Girls ___Boys ___Center ___Line

k. How many games? ___ (2 minimum) ___All Day ___Sat ___Sun Comments? _____

l. Other Comments: _____

[SEND](#)