



# AYSO SUMMER BLAST-OFF REFEREE INFORMATION FORM

HOSTED BY REGION 583 • SOUTH ONTARIO



I PLAN TO BRING A REFEREE TEAM TO THE TOURNAMENT  YES  NO

REFEREE INFORMATION FORM DATE \_\_\_\_\_

REGION \_\_\_\_\_ TEAM NAME \_\_\_\_\_

COACH NAME \_\_\_\_\_

AGE DIVISION  U-10  U-12  U-14  U-16  U-19  BOYS  GIRLS  COED

REFEREE TEAM CONTACT PERSON

NAME: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ TEAM ROLE: \_\_\_\_\_

### PROVIDE THE FOLLOWING INFORMATION FOR EACH REFEREE

- Badge Level: (R= Regional I= Intermediate A=Advanced N= National) Please Include the date they were certified referee at that level
- In each box under Center/Assistant/Boys/Girls, provide the highest level they are competent to referee (Ex: B10U, G12U, etc)
- In Player of Team, indicate if the referee has a child who is playing in tournament on this team

	REFEREE NAME	BADGE LEVEL	CERTIFICATION DATE	CENTER		ASSISTANT		PLAYER ON TEAM(Y/N)	CELL # / EMAIL
				BOYS	GIRLS	BOYS	GIRLS		
1									
2									
3									
4									

EACH REFEREE WILL RECEIVE A TOURNAMENT T-SHIRT. PLEASE INDICATE SIZES NEEDED. ALL SIZES ARE ADULT

REGIONAL REFEREE ADMINISTRATOR NAME

	XXL	XL	L	M	S
NUMBER OF SHIRTS NEEDED					

PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

**By my signature below, I certify that all referees listed are Certified per AYSO National Guidelines and qualified for officiating U-10 through U-14 games as indicated above.**

\_\_\_\_\_  
RAA SIGNATURE AND DATE (BLUE INK PLEASE)

**By my signature below, I certify that all referees listed are Certified per AYSO National Guidelines and qualified for officiating 16U through 19U games as indicated above.**

\_\_\_\_\_  
AREA REFEREE ADMINISTRATOR'S NAME

\_\_\_\_\_  
ARA SIGNATURE AND DATE (BLUE INK PLEASE)

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
EMAIL

\*\*\* Include this form with your application. If you are not planning on bringing a referee crew, leave this form blank, but still send it with your application.