AYSO Apricot Jam Referee Information Form

Girls April 6 & 7, 2013 and Boys April 20&21, 2013

I plan to bring a referee team to the tournament Y/N:		**Referee Information Form Date:**	

Region: _____ **Team Name:** _____

Coach Name: _____

Age Division:
please circle **U-10** **U-12** **U-14** **U-16** **U-19** **Boys** **Girls**

The Referee Refund Check should be mailed to: AYSO Region_____Attn:_____

Mailing Address:_____

City:_____ State:_____ Zip:_____

Your team's $150 referee deposit will be refunded if you provide a qualified referee team, and if all scheduled assignments are complete. A "qualified" referee team should contain 3 Experienced Regional Referees for U10 teams, **at least** one Intermediate Referee for U12 teams and **at least** one Advanced Referee for U14 teams. Referees may only represent one team at a time. Referee teams may be divided and scheduled separately based on the needs of the tournament. Referees who do not have children participating in the tournament will be assigned matches to best accommodate the tournament match and referee schedule. **We prefer that coaches with teams playing in the Tournament refrain from refereeing**. Any changes or Substitutions to your referee crew require the submission of a new form signed by your Regional Commissioner or Regional Referee Administrator. Review the Tournament Referee Plan for complete details.

Referee Team Contact Person

Name: _____ **Email Address:** _____

Cell Phone: **Home Phone:**

Provide the following information for each referee.

- For "Badge Level", insert R = Regional, I = Intermediate, A = Advanced, N = National. Also the date they were certified at that level.
- In each box under "Center/Assistant/Boys/Girls", provide the highest level they are competent to referee (e.g. BU-10, GU-12, etc.)
- In "Player on Team", indicate if the referee has a child who is playing in the tournament on this team.

	Referee Name	Badge Level	Certification Date	Center		Assistant		Player on Team (Y/N)	Home Phone/ Email
				Boys	Girls	Boys	Girls		
1									
2									
3									
4									

By my signature below, I certify that all referees listed are trained and Safe Haven certified AYSO referees and qualified for officiating U-10 through U-14 games as indicated above.

_____ _____ _____
Regional Referee Administrator's Name Phone Number Email

_____
RRA Signature and date (Blue ink please)