



## 2009 Referee Registration Form

### **SECTION I - CONTACT INFORMATION:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Cincinnati Hills SAY Soccer District: \_\_\_\_\_

### **SECTION II - REFEREE EXPERIENCE:**

New Referee: \_\_\_\_\_ (check)

Existing SAY Referee: \_\_\_\_\_ (check) Certification Date: \_\_\_\_\_ District: \_\_\_\_\_

Existing USSF Referee: \_\_\_\_\_ (check) Certification Date: \_\_\_\_\_ Grade: \_\_\_\_\_

Level Experience: (check) Passers \_\_\_\_\_ # years \_\_\_\_\_ Kickers \_\_\_\_\_ # years \_\_\_\_\_

Wings \_\_\_\_\_ # years \_\_\_\_\_ Minors \_\_\_\_\_ # years \_\_\_\_\_

Strikers \_\_\_\_\_ # years \_\_\_\_\_ Seniors \_\_\_\_\_ # years \_\_\_\_\_

### **SECTION III - REFEREE PREFERENCES:**

Playing Level: Passers \_\_\_\_\_ Wings \_\_\_\_\_ Strikers \_\_\_\_\_ Kickers \_\_\_\_\_ Minors \_\_\_\_\_ Seniors \_\_\_\_\_

Preferred District(s) #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

### **SECTION IV – SUMMARY:**

- I have completed the on-line training module in full and completed all knowledge checks Yes \_\_\_ No \_\_\_
- I have reviewed and understand all the Cincinnati Hills SAY Soccer referee guidelines Yes \_\_\_ No \_\_\_
- I am 18 years of age or older and have completed a Risk Assessment Form on-line Yes \_\_\_ No \_\_\_

By signing below, I am confirming that all the information contained on this registration form is correct and I agree to abide by all referee policies and procedures set forth by the Cincinnati Hills SAY Soccer Area.

Referee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **For Official Use:**

Approved \_\_\_\_\_ Date: \_\_\_\_\_ Referee # \_\_\_\_\_