



REFEREE INFORMATION SHEET

REFEREE APPLICATION FOR ODP – REGION IV

LOCATION: **University of the Pacific - Stockton, CA**

DATES: **JUNE 30 – JULY 21, 2008 (4 SESSIONS)**

[Please type or print legibly and dark]

Name _____
Last Proper First Name MI Nick Name

Address _____ City/State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Age ____ Sex ____

E-Mail Address _____ Previous ODP Camp No Yes, What Year(s) _____

Referee Experience

Current Year Career
Youth Games Referee _____ Asst. Ref _____
Amateur Games Referee _____ Asst. Ref _____
Current USSF Grade: [08] [07] [06] [05] [04-03] [Emeritus]:
Date Attained Current Grade: _____

COMFORT LEVEL: What types of games do you feel more comfortable working as a referee or linesman?

Referee: U19 U17 U16 U15 U14 U12
Asst Ref: U19 U17 U16 U15 U14 U12

Which Session would you like to attend? June 30 – July 5 '94s & '93s July 6 - 11 '92s July 12 -16 '91s July 16 -21 '95s
How will you get to Camp? with State Team Private Car other (list) _____

Are you in any way associated with a team, coach or player participating in this camp? No Yes

If yes, please fill in the following: State Team _____ Age Group _____ Relationship _____

I hereby certify that I have completed all Referee registration requirements of USSF for this year. I understand that submitting this selection form represents a firm commitment on my part to referee at the competition noted above, should I be selected.

Date form completed: _____ Signature of Referee: _____

Referee: Mail this completed application to your state S[Y]RA without delay.

I hereby certify that the information submitted by the above Referee has been verified by me. I recommend that this Referee be favorably considered for participation in the above competition. I further certify that this Referee has completed all registration requirements of USSF for this year.

S[Y]RA Signature: _____ Date: _____

Is a Risk Management form properly filed with the State Association? Yes No If no, explain.