



REFEREE AVAILABILITY FORM

Please print/type all information



NAME _____ Age _____

(H) Phone _____ (W) Phone _____

Cell Phone _____

Mailing address: _____ City _____ Zip _____

Email address _____

USSF GRADE _____ Years of Referee Experience _____

USSF # _____ (required)

Assignment preferences:

Younger boys/girls _____ older boys/girls _____

Team Affiliations _____

Available Fri. _____, Sat. am _____, pm _____, Sun. am _____, Sun pm _____

Are you playing in the tournament? _____ If yes, you will also need to provide your schedule as soon as it is available.

If you are part of a crew covering field for weekend, please list names and addresses of crew members below or on reverse.

of referees covering your crew _____ (minimum of 4).

Note: Crew Assignments are not guaranteed.

Maximum # of games you wish to referee per day _____

Please note that state assessors will be on site at Independence Park throughout the weekend doing assessments for requested grade upgrades as well as mentoring.

Return form to: Canton Soccer Club
Attn: Jamie Kaczanowski
44345 Dartmouth
Canton, MI 48188