PYSA Referee Information Sheet Fall 2009

PLEASE PRINT CLEARLY IN BLUE OR BLACK INK

FIRST NAME MI LAST NAME

ADDRESS CITY ZIP CODE

HOME TELEPHONE CELL PHONE

E-MAIL ADDRESS AGE ON OCT 24

SCHOOL GRADE SEASONS PYSA REFEREE EXPERIENCE

IF YOU ARE ON A SOCCER TEAM, PLEASE INDICATE WHICH TEAM, THE AGE GROUP, THE COACH AND THE PRACTICE DAYS AND TIMES. IF YOU ARE NOT SURE, PUT WHAT YOU DO KNOW.

TEAM AND AGE GROUP COACH PRACTICE DAYS AND TIMES

IN THE PREVIOUS YEAR, HOW MANY PYSA GAMES IN EACH GROUP HAVE YOU WORKED?

BOYS: K _____ 1^{ST}- 2^{ND} _____ 3^{RD}- 4^{TH} _____ 5^{TH} – 6^{TH} _____ 7^{TH} – 9^{TH} _____

GIRLS: K _____ 1^{ST}- 2^{ND} _____ 3^{RD}- 4^{TH} _____ 5^{TH} – 6^{TH} _____ 7^{TH} – 12^{TH} _____

TRAVEL GAMES (ANY AGE GROUP) _____ ARE YOU A USSF CERTIFIED REFEREE? YES NO

PLEASE INDICATE YOUR AVAILABILITY BY PUTTING AN **X** IN THE BOX IF YOU **ARE NOT** AVAILABLE. IF THERE IS A CHANGE DURING THE SEASON, CALL. NO GAMES WILL BE SCHEDULED ON OCT 31. IT IS SIMPLY TO CHECK AVAILABILITY TO AID IN THE SCHEDULING OF MAKE-UP GAMES.

TIME	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
	9/12	**9/13**	**9/20**	**9/26**	**9/27**	**10/3**	**10/4**	**10/10**	**10/11**	**10/17**	**10/18**	**10/24**	**10/25**	**10/26**	**10/31**
8 a.m.															
9 a.m.															
10 a.m.															
11 a.m.															
12 p.m.															
1 p.m.															
2 p.m.															
3 p.m.															
4 p.m.															