

## WALNUT SPRING FLING 2023 REFEREE FORM



I plan to bring a re	oforce toom	to the te	urnament V	/N:		Pafaraa	Inform	nation Forr	n Data:	
I plan to bring a referee team to the tournament Y/N:						veiele6	шотп	ialion Forf	ii Dale:	
Region:	т	eam Namo	e:							
Coach Name:										
Age Division:	U-10	U-10 U-12 U-14			Boys Girls					Girls
Referee Team Co	ntact Perso	n								
Name:					_ Ema	ail Addı	ress:			
Day Phone:					Eve	ning Pl	none:			
rovide the following i	nformation fo	r each refer	ee.							
"Badge Level", ins	sert R = Regio	onal, I = Inte	ermediate, A	= Advan	ced, N	= Nation	al. Also	, the date the	ey were c	ertified at that level.
In each box under	r "Center/Ass	istant/Boys/	'Girls", provid	e the hig	hest le	vel they	are com	petent to ref	feree (e.g	, BU-10, GU-12, etc.)
In "Player on Tea	m", indicate if	the referee	has a child v	vho is pla	aying in	the tou	rnament	t on this tean	n.	
<del></del>		Center Assistant Player								
		Badge	Certifica-	Cen		ASSI	Starit	on Team		
Referee I	Name	Level	tion Date	Boys	Girls	Boys	Girls	(Y/N)	Н	ome Phone/ Email
1										
2										
3										
4										
4										
ach referee will red	coive a tourr	ament T-S	Shirt Plaase	indicat	-a ciza	neede	ما ۵۱۱ م	izes are Ad	lult	
acii relelee wiii rec		XL XL	L M	S	.c sizes	riceue	u. Ali s	izes are Au	iuit.	
Number of Shirts N	leeded									
Regional Referee Administrator's Name			Phone Number				Email			
Ry my signature i	helow I cer	tify that a	ll rafaraas l	istad aı	re Cer	tified n	or AVS	O Nationa	l Guidali	nes and qualified f
officiating U-10 th						illica p	oi Ai o	o Hationa	. Guiden	nes and quanted is
			RRA Sign	ature an	d date i	(Blue ink	nlease	)		
						(=:===	. p.2000	,		
Area Referee Administrator's Name P				Phone	one Number			Email		
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					re Cert	tified p	er AYS	O Nationa	l Guideli	nes and qualified fo

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