CYSA Ref Information Sheet

WRITE VERY LEGIBLY

**** If I can't read your writing, I can't call you

	E-m	ail address							
Name								_	
Address								_	
	Cit	y		ST		Zipcode		_	
Home numbe	er					-			
Your cell n	number (ne	ot parents)				(if you have	one)		
Mom's Name	•					cell #			
Dad's Name						cell #			
Your Age			_						
Date of Birth	1								
School					What grade			_	
Do you curre	ently play so	occer?	Y / N	_How many ye	ears?		_Current tea	m <u>?</u>	
Best time to	reach you.			Best	number to	reach you.	Home	/ Cell	
Who will sc	hedule you	ur games?	You	Mom	Dad				
How many	games wou	uld you like t	o do per w	eek?			-		
	What days	s/nights can y	our referee?	(circle all that	t apply)				
			Night game	S		Day g	games	1	
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	J	
L									
Referee E	Experien	ce:							
	How man		wo per yea	r) you have b		eree in each	n grade?		
	Grade 9	(if NEW put new)		Grade 8	f NEW put new)		Grade 7	(if NEW put new)	
	 	Blue Badg	e		ack Badg	е	7	Black Badge	
	If you refe	ereed last se	ason or las	st year what p	osition ar	nd age(s) d	id you do?		
Line only		U5/U6 middle		U7/U8 middle		U9/U10 middle		U11 and up middle	

Line only	U5/U6 middle	U7/U8 middle	U9/U10 middle	U11 and up middle

What would you like to referee this season?

Anything else we need to know?

Jim Henderson info CYSA Assignor cell 214-505-8870 jhenderson@coppellyouthsoccer.com

if you are not registered as a referee do so on at. (referee registration link)

Coppell Youth Soccer web site http://coppellyouthsoccer.com/

Weather Hotline 972/436-8648

Notes: