

Reddan Thunder

Reddan Soccer Park

Saturday & Sunday, May 21, 22 and 23, 2010

Referee Request for Assignments (RFA)

Name _____ USSF Level _____

Address _____ Age _____

City _____ ST _____ ZIP _____ ← Be sure to fill these out

Phone: Home _____ Work _____ Cell _____

Email address (Please print clearly): _____ @ _____

I. I request to be assigned during the following times: (ex: or 8:00am - 7:00pm)

Friday: _____ - _____

Saturday: _____ - _____

Sunday: _____ - _____

II. I feel comfortable doing games at the following levels:

U11 Ref___ AR___ U12 Ref___ AR___ U13 Ref___ AR___ U14 Ref___ AR___

U15 Ref___ AR___ U16 Ref___ AR___ U17 Ref___ AR___ U18 Ref___ AR___ U19 Ref___ AR___

III. Are you associated with a team in this tournament? ___Yes ___No

If yes, as ___a player, ___a coach, ___a parent/sibling. Which team? _____

(Please be as specific as possible with team name—be sure to include age level)

IV. In keeping with the *Code of Ethics for Referees*, I intend to honor this commitment provided I am informed by email of my assignments by May 14, 2010.

Signature

Date

Mail it to MAYSA, ATTN: Linda Huttenhoff, 5964 Executive Dr., Madison, WI 53719 or FAX it to (608)276-0119. Please return this form by April 23, 2010.

Referee Fees (subject to change without notice):

U9/10: \$15; U11 & U12: \$20/\$15/\$15; U13 & U14: \$25/\$20/\$20; U15 – U19: \$30/\$25/\$25