



Sponsored by AYSO Area 1F  
**AYSO Area 1F Founders Cup**  
**April 20 - 21, 2024**



**Tournament Referee Information Form**

I plan to bring a referee team to the tournament Y/N: \_\_\_\_\_

Referee Information Form Date: \_\_\_\_\_

Region: \_\_\_\_\_ Team Name: \_\_\_\_\_

Coach Name: \_\_\_\_\_

Age Division: 8U    10U    12U    14U    16U    19U    Boys    Girls    Coed

**Referee Team Contact Person**

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Provide the following information for each referee.

- For "Badge Level", insert R = Regional, I = Intermediate, A = Advanced, N = National. Also the date they were certified at that level.
- In each box under "Referee/Assistant/Boys/Girls", provide the highest level they are competent to referee (e.g. BU-10, GU-12, etc.)
- In "Player on Team", indicate if the referee has a child who is playing in the tournament on this team.

	Referee Name	Badge Level	Certification Date	Referee		Assistant		Player on Team (Y/N)	Home Phone/ Email
				Boys	Girls	Boys	Girls		
1									
2									
3									
4									

Each referee will receive a tournament T-Shirt (max of 3 per Team). Please indicate sizes needed. All sizes are Adult.

	AS	AM	AL	AXL	AXXL	AXXXL
Number of Shirts Needed						

\_\_\_\_\_  
Regional Referee Administrator's Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email

**By my signature below, I certify that all referees listed are trained and Safe Haven certified AYSO referees and qualified for officiating 8U through 14U games as indicated above.**

\_\_\_\_\_  
RRA Signature and date (Blue ink please)

\_\_\_\_\_  
Area Referee Administrator's Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email

**By my signature below, I certify that all referees listed are trained and Safe Haven certified AYSO referees and qualified for officiating 16U and 19U games as indicated above.**

\_\_\_\_\_  
ARA Signature and date (Blue ink please)