

## 2009 ORANGE CLASSIC GIRLS INTERNATIONAL TOURNAMENT

### Referee Application and Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Daytime Phone (\_\_\_\_) \_\_\_\_\_ Evening Phone (\_\_\_\_) \_\_\_\_\_

Social Security # \_\_\_\_\_ Current Referee Grade \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Date attained Current Grade \_\_\_\_/\_\_\_\_/\_\_\_\_

Email Address \_\_\_\_\_

GAME EXPERIENCE : Please enter your approximate # of games this year as a referee and Assistant Referee

	Center	Line
10U - 12U	_____	_____
14U - 16U	_____	_____
17U - 19U	_____	_____
Above 19U	_____	_____

GAMES DAY & TIMES YOU ARE AVAILABLE : Please mark the days & times you can work (X)

Sunday Dec. 27 Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening \_\_\_\_\_

Monday Dec. 28 Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening \_\_\_\_\_

Tuesday Dec. 29 Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening \_\_\_\_\_

Wednesday Dec. 30 Morning \_\_\_\_\_ Afternoon \_\_\_\_\_

TEAM AFFILIATION : Is your child or sister playing? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, Team Name \_\_\_\_\_ Age Group \_\_\_\_\_

HOTEL ACCOMMODATIONS : Will you need Hotel Accommodations ? YES \_\_\_\_ NO \_\_\_\_

FINALS : Are you Available to Referee in a Final or Semi-final Game: YES \_\_\_\_ NO \_\_\_\_

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Please complete the application and information form and return it to:

ZOOM STEMPLÉ  
ORANGE CLASSIC GIRLS TOURNAMENT  
931 CORKWOOD St.  
HOLLYWOOD, FL 33019

OR YOU MAY FAX (CALL FIRST): 954-925-2383  
E-MAIL : zoomstemple@netzero.net