

# **SMYS** Referee Information Sheet

Please PRINT all of the following information clearly. Also, please understand that there is not implied agreement that SYMS can provide any specific number of games for you to referee. Games are assigned according to several factors including proficiency, availability, and past experience.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: MD Zip Code \_\_\_\_\_

Answer if under 18: Year Born: 19 \_\_\_\_\_ Grade: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Phone Number: (Home): \_\_\_\_\_ (Work) \_\_\_\_\_

(Cell): \_\_\_\_\_

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



First Season as Referee: No  Yes

Recertification Date and Location (if known): Date: \_\_\_\_\_

Location: \_\_\_\_\_ (complete if returning referee)

SMYS Referee Level: A  B  C  D  E/Entry Level  Don't Know

Have you been a center referee? No  Yes

What is the highest grade level you feel you are qualified to **center** this season? (check one box below)

None, AR only  U8  U9  U10  U10R+  U12  U12R+  U15  U19

Are you currently playing on a SYMS or United Team? No  Yes  If yes, which team and age group: \_\_\_\_\_

