Eastern Pennsylvania Youth Soccer Association

Referee Assignor Certification Form

To be Completed by the Hosting Organization

Please Type or Print Clearly

Attach copies of your Application to Host Form and your Hosting Agreement and send to your Referee Assignor.

Tournament Name _________________________________________________________

Hosting Organization _______________________________________________________

Location(s) of Tournament __________________________________________________

Date(s) of Tournament _____________________________________________________

____________________________________   ______________
Signature of President of Hosting Organization   Date

_____________________________________   ______________
Signature of Tournament Director     Date

(Please Complete and Return to Hosting Organization)

To be Completed by the Appropriate Certified Referee Assignor

Local Referee Chapter ________________________________________________

Assignor’s Name _____________________________________________________

Address ____________________________________________________________

Phone _____________________________________________________________

Email address _______________________________________________________

By signing below, I certify the availability of a sufficient number of officials for the tournament identified above within the guidelines of US Youth Soccer and EPYSA.

____________________________________   _____________
Signature of Certified Referee Assignor    Date

By signing below, I am stating that I CANNOT certify the availability of a sufficient number of officials for the tournament identified above for the following reason(s):

______________________________________________________________________

____________________________________   _____________
Signature of Certified Referee Assignor    Date

Note to Hosting Organization: This form must be attached to your Application to Host Form in order for your Tournament Application to be considered complete.