



The Ontario Soccer Association

2012 Regional Referee Upgrading Program

Application Form
(Complete highlighted areas)

Referee: _____ Class: _____ OSA Registrant Number: _____
Full Name

Address: _____
Number & Street Name Apt. City Postal Code

Email: _____

Phone: () () ()
Home Cell Other

District Association: _____

Year you began refereeing: _____

Referee (Details of leagues/divisions/competitions/age groups refereed):

Assistant Referee (Details of leagues/divisions/competitions/age groups refereed):

Education Sessions (provide date/location/topic/instructor of any education sessions attended, if applicable):

Education Session #1: _____

Education Session #2: _____

Education Session #3: _____

Education Session #4: _____

Education Session #5: _____

Other pertinent information (if applicable):

Date: _____

dd/mm/yyyy

Referee signature: _____

*If submitting an electronic copy to the OSA,
please type your name in the space above.

THE OSA WILL OBTAIN DRC RECOMMENDATION ON BEHALF OF THE REFEREE

DEADLINE TO SUBMIT APPLICATION IS MARCH 7th, 2012

COST OF COURSE IS \$160 (application will not be processed without payment)

\$135 will be refunded if applicant does not pass fitness test by deadline; No refund if you fail the exam

Please send application to: 7601 Martin Grove Road, Vaughan ON, L4L 9E4, Attn: Lyndon Hooper