

# JACKSON PURCHASE INVITATIONAL

## MARCH 26-28, 2010

**Note: You must be a current USSF Certified Referee to participate. Return by March 10, 2010.**

Referee: \_\_\_\_\_ Age: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Current 2007 USSF Grade: 4 5 6 7 8      Years Experience: \_\_\_\_\_

Are you coming with a team: YES or NO      If yes, which team: \_\_\_\_\_ U-    B or G

NOTE: We can schedule around your son's or daughter's games! Players, we can schedule around your games!

*\*\*The Tournament Staff reserves the right to schedule officials at their discretion\*\**

Available for Games: Number of games preferred TO referee each day: \_\_\_\_\_

Friday Afternoon	March 26	YES	NO
Saturday Morning	March 27	YES	NO
Saturday Afternoon	March 27	YES	NO
Sunday Morning	March 28	YES	NO
Sunday Afternoon	March 28	YES	NO

Requests: \_\_\_\_\_

Please indicate your level of game experience for 2009:

	<b>REFEREE</b>	<b>ASST. REFEREE</b>	<b>REFEREE</b>	<b>ASST. REFEREE</b>
Under 17 Boys	_____	_____	Girls	_____
Under 16 Boys	_____	_____	Girls	_____
Under 14 Boys	_____	_____	Girls	_____
Under 12 Boys	_____	_____	Girls	_____
Under 10 Boys	_____	_____	Girls	_____

Please provide two references as to your abilities/skills for officiating:

1 .Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

2, Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Please return this form by Mar. 10, 2010 to

Bill Roberts  
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