



# Ohio South State Referee Committee Referee Maintenance Form

WWW.OSSRC.COM



NAME OF OFFICIAL: \_\_\_\_\_

16 DIGIT USSF ID NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### **OSSRC ONLINE TRAINING**

Date: \_\_\_\_\_ Location: \_\_\_\_\_ Instructor: \_\_\_\_\_

### **OSSRC WRITTEN TEST**

Date: \_\_\_\_\_ Location: \_\_\_\_\_ Instructor: \_\_\_\_\_

### **Fitness: Completed during the previous August 1 to July 31**

Date: \_\_\_\_\_ Location: \_\_\_\_\_ Instructor: \_\_\_\_\_

### **Referee Assessments Passed: Completed during the previous August 1 to July 31**

Date: \_\_\_\_\_ Location: \_\_\_\_\_ Level of Competition: \_\_\_\_\_

Assessor: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

### **ADULT GAMES**

Date: \_\_\_\_\_ Location: \_\_\_\_\_ League: \_\_\_\_\_  R  AR

Date: \_\_\_\_\_ Location: \_\_\_\_\_ League: \_\_\_\_\_  R  AR

Date: \_\_\_\_\_ Location: \_\_\_\_\_ League: \_\_\_\_\_  R  AR

Date: \_\_\_\_\_ Location: \_\_\_\_\_ League: \_\_\_\_\_  R  AR

Date: \_\_\_\_\_ Location: \_\_\_\_\_ League: \_\_\_\_\_  R  AR

Date: \_\_\_\_\_ Signature of Referee: \_\_\_\_\_

Must attach with Referee Registration form.

I hereby declare that the above statement is true to the best of my knowledge and belief.