

2025 Region 13 Thanksgiving Tournament Referee Information Form



I plan to bring a referee team to the tournament Y/N:					/N:	Referee Information Form Date:				
Region: Team Name:										
Coach Name:										
Age Division:		U-10	U-12	U-14	U.	-16	U-19	Boys	Girls	s Coed
Referee Team Contact Person										
Name: Email Address:										
Day Phone: Evening Phone:										
Provide the following information for each referee.										
 "Badge Level", insert R = Regional, I = Intermediate, A = Advanced, N = National. Also, the date they were certified at that level. In each box under "Center/Assistant/Boys/Girls", provide the highest level they are competent to referee (e.g., BU-10, GU-12, etc.) In "Player on Team", indicate if the referee has a child who is playing in the tournament on this team. 										
		Center Assistant Player								
	Referee Na	me	Badge Level	Certifica- tion Date	Boys Gi	rls Boys	Girls	on Team (Y/N)	Home	Phone/ Email
1										
2										
3										
4										
Each referee will receive a tournament T-Shirt. Please indicate sizes needed. All sizes are Adult.										
Number of Shirts Needed XXL XL L M S										
Regional Referee Administrator's Name Phone N						e Number Email				
By my signature below, I certify that all referees listed are Certified per AYSO National Guidelines and qualified for officiating U-10 through U-19 games as indicated above.										
RRA Signature and date (Blue ink please)										

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Area Referee Administrator's Name	Phone Number	Email							
By my signature below, I certify that all referees listed are Certified per AYSO National Guidelines and qualified for officiating U-16 and U-19 games as indicated above.									
ARA Signature and date (Blue ink please)									

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