



Check only one:

- Referee Assignor
- Instructor Indoor/Futsal
- Assessor

USSF ID: - - -

Name: _____ Gender: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Date of Birth: _____

Email address: _____

Information Certification:

I understand that by successfully completing the educational requirements and registering with the USSF, Inc. as a referee, I am entitled to act as a game official at the appropriate level of competition indicated by my approved grade. I understand that my registration does not guarantee my receipt of any specific refereeing assignments, and does not apply to non-USSF affiliated games. I further understand that my registration with USSF does not create an employment contract or an employment relationship with USSF.

I also certify that I have no physical illness or impairment which will make participation in soccer-related activities dangerous to me.

I agree to participate in, and comply with, the risk management program(s) of the Massachusetts Youth Soccer Association and the Massachusetts Adult State Soccer Association. By signing this form, I hereby certify that I have not been convicted of a felony, a crime of violence, any crime against an individual, or fraud, and further that I give consent for a review of any existing criminal information, pursuant to M.G.L. c6, section 172H. I certify that the information contained in this form shall be true and correct, and that I have not lied about, misrepresented or otherwise falsified such information. Incomplete forms will be returned.

Signature: _____

Date: _____

ADMIN USE ONLY:

- International 1 2
- National 3 4
- State 5 6
- Referee 7 8
- Recreational 9 11

- Emeritus:**
- 13 National
 - 14
 - 15 State
 - 16

Cash \$ _____
Check \$ _____ # _____