#### LONG BEACH SOCCER REFEREE ASSOCIATION



Founded 1979

Serving throughout Southern California

# Membership Agreement PLEASE PRINT CLEARLY



Las	st Name:	First N	Name:		M.I
Ad	dress		City	Zip	
Но	me Phone ()	(	Cell Phone (	)	
Yea	ars Officiating	E-MAIL			
Ag	e: D.O.B	Sex: _			
Re	feree Grade: USSF USSF II	D#			
Ne	w Referees: Clinic Location		Date:	Instructor	
2. 3. 4. 5. 6. 7. 8. 9.	Check Boxes Registered Live Scan				
3. 4. Obl 1. 2. 3. 4. I/W	<ol> <li>In order to receive games after being interviewed:         <ul> <li>a) Submit Membership Application Deposit as outlined in Policies #1 above</li> <li>b) Contact an assignor with thier availability.</li> </ul> </li> <li>Members will receive payment for games on the field, via US Mail, or at membership/board of directors meeting.</li> <li>Any complaints/conflicts will be resolved by the L.B.S.R.A. Board of Directors and/or President and/or Assignor.</li> <li>Obligations         <ul> <li>Members must attend at least 5 or 8 meetings per year depending on grade of Official.</li> </ul> </li> <li>Each member must acquire and maintain a current U.S.S.F. certification.</li> <li>Members must maintain professional appearance by having and wearing/using all the equipment and uniforms required.</li> </ol>				
Re	feree Name (PRINT CLEARLY)		Parent Name (If	referee is under 18yea	rs of age)
	feree Signature	Date	Parent Signati	ure	Date
12	ee Harmon 654 Molette St orwalk CA 90650			ministrative Use Only	y Live Scan

(562) 688-7408 socalreferee@gmail.com

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## **Application Review**





	NAME:
1)	Years of refereeing experience and what organization?
2)	Present assigner and phone number? Can we ask for a referral?
3)	How did you hear about the organization?
4)	What are your short and long term goals for yourself in refereeing?
5)	Describe some quality or qualities that you will bring into the organization to make it better through your efforts?
6)	Would you be willing to travel to games for the benefit of the association.
7)	Will you work with inexperienced referees to assist them later in you career as you advance?
8)	Would you be willing to maintain your referee grade for a longer period of time to upgrade yourself?
9)	Why did you get into refereeing and why do you want to stay into this type of profession?
10)	How committed will you be to assist in making this organization a quality oriented group?

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#### Parent Consent and Indemnity



To: The Board of Directors

Long Beach Soccer Referee Association Group

Ĭ,	being the mother/father/legal guardian of
	a member of the Long Beach Soccer Referee Association group, hereby
request you to allow/ him/her to take p	part in refereeing/ assignment to be held at
from	to
I hereby appoint and authorize the men	mber in-charge to act in place as parent with full authority to consent to my son/
daughter undergoing surgical or other	medical treatment. I undertake to pay the cost of such treatment. I fully understand and
accept that all activities are undertaken	n at my son's/daughter's own risk.
I am aware that neither the Long Beat	ch Soccer Referee Association not its Members accept responsibility for any loss,
injury that the person or property of m	y son/daughter may sustain while engaged in any activity on the course and I waive
any right that I or my son/daughter ma	y have to claim compensation against the Long Beach Soccer Referee Association or
any of its Members in respect of any le	oss, injury, or damage incurred while engaged in any activity as a referee however
arising and whether as a result of negle	igence or otherwise and I indemnify them against all such claims.
ADDRESS:	Signed:
Insurance Company	Number