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|  | ***Valley East Ringette Association******PO Box 13, Val Caron, ON P3N 1N6******www.valleyeastringette.com*** |  |

**VALLEY EAST RINGETTE REFEREE APPLICATION**

Please complete this application **by September 14th** and e-mail to

 referee@valleyeastringette.com

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| **Applicant Information** |
| Name: |  | Date of Birth: |  |
| Home Number: |  | Cell Number: |  |
| Street Address: |  | City: |  |
| Postal Code: |  |
| Email: |  |

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| **Qualifications:** |
| Have you completed Level 1 Officiating Clinic? |  |
| Comments (e.g. Availability, etc.) |
|  |

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| --- | --- | --- | --- |
| Year | Team (i.e. Novice (U10)) | Association | Division (A, AA, Houseleague, etc) |
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Due to registration uncertainty, the final selection of referees may be delayed. Every effort will be made to contact all applicants before the start of the season. Interviews may be conducted.

Valley East Ringette Association reserves the right to solicit more applications if needed.