

Orange County Soccer Referee Association

Application for Membership

 Please Print Clearly

 First Name
 Last Name

 Mailing Address
 Mailing Address

 City
 St.
 Zip.

 Home Phone ()
 Mobile ()

 Email Address
 Birth Date (Minimum age 14):

 Date of USSF Certificated and Number (
 USSF Grade

What is the highest age group you are Comfortable to Referee:

List other Referee Associations of which you are a member:

In signing this application, I agree to hold OCSRA Inc., its' assignors, and Officer harmless for anything that occurs to me, or my property, while performing any task related to refereeing soccer matches assigned under the direction of OCSRA inc. I also understand that continued membership in OCSRA is conditioned upon my compliance with the ethical and professional standards of the USSF and OCSRA inc. as outlined in the directives and publications of membership.

Membership does not guarantee game assignments.

Signed:

Application fee: \$50.00

Make check payable to: OCSRA

Mail completed form with fee to:

Don Feldman

Orange County Soccer Referee Association

297 N. State College Blvd. Apt. 1123

Orange, Ca. 92868

email smlois617@aol.com