

Wide World Sports Center *Indoor Soccer*



Referee Profile

**Please fill in and submit this contract, along with your completed Quiz and Availability Form.
Please blacken in the appropriate check-boxes (O).
If your address changes at any time during the year, please notify us immediately at (734) 913-GOAL.**

NAME Last _____ First _____

AGE ____ **GENDER** (4 one) M O F O **DATE OF BIRTH** m ____ d ____ y ____

SOCIAL SECURITY NUMBER (required for accounting purposes) ____ - ____ - ____

CURRENT ADDRESS

PERMANENT? O IF NOT, applies from: m ____ d ____ y ____ to m ____ d ____ y ____

Address _____

City _____ **State** ____ **Zip Code** _____ - _____

Home area code (____) ____ - ____ extension _____ best time to call _____

Work area code (____) ____ - ____ extension _____ best time to call _____

Mobile area code (____) ____ - ____ extension _____ best time to call _____

Pager area code (____) ____ - ____ extension _____ best time to call _____

Fax area code (____) ____ - ____ extension _____ best time to call _____

Other area code (____) ____ - ____ extension _____ best time to call _____

E-mail #1 _____ @ _____

E-mail #2 _____ @ _____ May we use e-mail to

send your referee schedule and other important information? (4 one) Yes O No O

May we use a fax to send your referee schedule and other important information? (4 one) Yes O No O

HOW MANY YEARS HAVE YOU OFFICIATED SOCCER AT WIDEWORLD SPORTS CENTER? ____

HOW MANY YEARS HAVE YOU OFFICIATED ORGANIZED SOCCER? ____

HOW MANY YEARS HAVE YOU OFFICIATED AS A U.S.S.F.-CERTIFIED REFEREE? ____

2005 / 2006 U.S.S.F. GRADE (4 one) 9 o 8 o 7 o 6 o 5 or higher o previously but not currently certified o never certified o

WHAT TYPES OF ORGANIZED SOCCER COMPETITIONS HAVE YOU OFFICIATED ? (4 as many as apply)

none O non-USSF-sanctioned house or recreational leagues O USSF-sanctioned leagues O high school (NFHS or MHSAA rules)O college (NCAA or NISOA) O futsal O

indoor soccer at WideWorld Sports Center other indoor soccer (arena-style)

IF YOU MARKED "OTHER INDOOR SOCCER," PLEASE LIST THE NAMES OF FACILITIES WHERE YOU REFEREED:

Name of Facility _____

City _____ State _____

Name of Facility _____

City _____ State _____

AT WHICH LEVELS HAVE YOU OFFICIATED ORGANIZED SOCCER ? (4 as many as apply)

none U6-U10 U11-U12 U13-U14 U15-U17 U18-U20 high school
adult recreational adult competitive college professional

WHICH TYPES OF GAMES DO YOU PREFER TO OFFICIATE ? (4 as many as apply)

girls boys U6-U10 U11-U12 U13-U14 U15-U17
adult co-ed women's men's recreational (incl. O30, O40) men's intermediate men's competitive

HAVE YOU AT ANY TIME BEEN RELEASED FROM EMPLOYMENT AT WIDEWORLD SPORTS CENTER?

YES NO

IF SO, BY WHOM AND FOR WHAT REASONS?

REFERENCES

Please list the name and phone number of two adults who can testify to your competence as a soccer official, and describe their role in the soccer referee community (referee, mentor, assignor, assessor, league official, etc.).

First Name _____ Last Name _____

% area code (____) _____ - _____ extension _____ best time to call _____

Role _____

First Name _____ Last Name _____

% area code (____) _____ - _____ extension _____ best time to call _____

Role _____

FOR OFFICE USE ONLY — DO NOT WRITE IN THIS SPACE

U6-U10 U11-U12 U13-U14G U13-U14B U15-U17G U15-U17B
adult co-ed women's men's recreational (incl. O30, O40) men's intermediate men's competitive
O

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Referee Contract

Please read and complete the following statement.

I, _____, agree that all information I have submitted to WideWorld Sports Center is correct to the best of my knowledge.
I hereby state that I am in good physical condition and able to safely participate in all activities involved in refereeing for WideWorld Sports Center (WWSC). I am aware of the risks inherent in participating in an athletic activity of this type.
I agree that I have read the information contained within this contract and agree to the terms and conditions stated within it.
I agree to follow all requirements of the WWSC Referee Program, including the WWSC Referee Code of Ethics.
I agree to study all instructions and information provided to me by WWSC and to implement all policies and procedures described therein.
I agree to honor all officiating commitments to the best of my ability, and to follow WWSC policy whenever a commitment cannot be honored due to extenuating circumstances.
It is my understanding that my employment as a referee at WWSC is contingent upon my on-the-field performance and my interpretation and implementation of the rules set forth by WideWorld Sports Center and its management.
I understand that at any time my employment at WideWorld Sports Center may be terminated without given reason.

- Signature _____ Date m ___ d ___ y ___

Please read and complete the following release of liability.

I, _____, acknowledge and agree that attending or refereeing soccer may be hazardous and may result in injury. I further agree that I assume all risks of injury for myself and anyone who comes with me to the premises incurred or suffered while upon the premises or as a result of using the facilities or equipment therein.

I further expressly agree to release WideWorld Sports Center, its owners, employees, agents, successors, assigns, affiliates and anyone else associated with WideWorld Sports Center from any claims, demands or damages whatsoever, whether developed or undeveloped, known or unknown, anticipated or unanticipated, have, now or in the future, including, but not limited to any and all claims, demands or damages for negligence, personal injury and/or loss, theft or destruction of personal property. It is my intention that this release be as broad as Michigan law allows releases of this sort to be. I understand that, without this document, the cost of participation would necessarily be greater, and I also acknowledge that I may obtain insurance to protect myself if I so choose.

I further agree to save, hold harmless, and indemnify WideWorld Sports Center, its owners, employees, agents, successors, assigns, affiliates, and anyone else associated with WideWorld Sports Center, from any and all claims, demands or damages, including cost, interest and attorneys' fees which they may suffer or incur as a result of any claims by me, anyone who comes with me to the premises, or related entities, and/or as a result of any claims, demand or lawsuits arising out of my actions or those of anyone who comes with me to the premises.

I HAVE READ THE FOREGOING RELEASE, I FULLY UNDERSTAND IT, AND AGREE TO BE BOUND BY IT.

Referee's signature _____ Date m ___ d ___ y ___

Signature of Parent or Guardian (if referee is under 18 years of age)

_____ Date m ___ d ___ y ___