# NEW REFEREE APPLICATION FORM

NAME _____ EMAIL _____

CELL # _____ HOME # _____ WORK # _____

CERTIFIED **Y** **N**

**If Yes:** Level _____ ADDRESS _____

HCOP # _____ _____

Years of Experience _____

AGE _____ HEIGHT _____

**PLEASE BE REMINDED THAT ALL OFFICIALS WITHIN HOCKEY CANADA MUST HAVE A VALID POLICE CHECK ON FILE BEFORE THEY CAN REFEREE. THIS POLICE CHECK MUST BE NO MORE THAN FOUR YEARS OLD (2006 OR NEWER) TO STILL BE VALID**

Do you have any immediate family member involved with a team in Woolwich Minor Hockey for the 2009-2010 season? **Y** **N**

If yes please provide their name, position and team _____

Will you be playing competitive hockey in 2009-2010 **Y** **N**

If YES at what level? (i.e Midget or Jr B) _____

| | |
|---|---|
| Why do you want to referee for the Elmira District Hockey Referees Association? | |
| | |
| What skills/ experience do you have that you feel will help you with officiating? | |

*EDHRA will be not distribute this information to any 3rd party, and will only use it to hire new officials, upon completion of the recruitment process, this information will be discarded appropriately. If hired your name, email and phone numbers will appear on the EDHRA contact list that will be made available to all officials