

# Guelph Soccer

519-824-2199

[admin@guelphsoccer.ca](mailto:admin@guelphsoccer.ca)

## 2010 Referee Clinics

### Application Form

Please print to complete this form.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (H): \_\_\_\_ - \_\_\_\_ - \_\_\_\_ (Cell) \_\_\_\_ - \_\_\_\_ - \_\_\_\_

E-Mail: \_\_\_\_\_

Mini-Referee Clinic  
March 20<sup>th</sup>, 2010  
\$40

Mini-Referee Clinic  
April 17<sup>th</sup>, 2010  
\$40

Entry Level Referee Clinic  
March 20<sup>th</sup> & 21<sup>st</sup>, 2010  
(2 Day Session)  
\$60

Entry Level Referee Clinic  
April 24<sup>th</sup> & 25<sup>th</sup>, 2010  
(2 Day Session)  
\$60

\*\*Please note that all clinic sessions will take place at St. John's Kilmarnock School, located at 2201 Shantz Station Road, Breslau, Ontario. Mini-Referee Clinic will run from 8am-2pm\*, and Entry Level Clinics will run from 8am-4pm\*.

For Office Use Only:
Date Received: _____ Paid By: _____

\*Note that a confirmation email will be sent to you the day prior to the clinic to confirm location, time and any equipment needed for these clinics.