



USSF NEW REFEREE CLINIC INSTRUCTOR'S WORK SHEET: DUE 24 HOURS FROM CLINIC COMPLETION

Date: _____ Place: _____

Clinic Type (**A SEPARATE SHEET FOR EACH CLINIC TYPE**): (Gr 8) 17 hr Entry _____ Bridge (Gr9 to Gr 8) 9 hr _____ Recreation (Gr 9) 9 hr _____
Gr 8 Futsal (indoor) _____ New Assignor 8 hr _____ New Assessor _____ Instructor: Associate(16 hr) _____ ITIP 24 hr _____

Host Club _____ Contact Person _____ # Phone _____

- 1. Lead Instructor _____ Hours Taught (do NOT include set up) _____
- 2. Instructor _____ Hours Taught (do NOT include set up) _____
- 3. Instructor _____ Hours Taught (do NOT include set up) _____
- 4. Instructor _____ Hours Taught (do NOT include set up) _____

Date Held: 1st Session _____ / _____ / _____ # Hours _____ #Attendees _____
 2nd Session _____ / _____ / _____ # Hours _____ #Attendees _____
 3rd Session _____ / _____ / _____ # Hours _____ #Attendees _____
 4th Session _____ / _____ / _____ # Hours _____ #Attendees _____

Number taking exam _____ Number passed exam _____ **CLUB CHECK ONLY**

Number registering as:

- Grade 8** (Entry Level) # paid @ \$75 _____ = Total \$ _____
- Grade 9** (Recreation) # paid @ \$58 _____ = Total \$ _____
- Grade 9 upgrade 8** (NOT registered in current year) # paid @ \$58 _____ = Total \$ _____
- Grade 9 upgrade 8** (registered in current year) # paid @ \$25 _____ = Total \$ _____
- Grade 8 Indoor** (Futsal) # paid @ \$60 _____ = Total \$ _____
- Assignor (new)** # paid @ \$55 _____ = Total \$ _____
- Instructor Gr 9 (new)** # paid @ \$55 _____ = Total \$ _____
- Instructor Gr 7 (new)** # paid @ \$60 _____ = Total \$ _____
- Assessor Gr 9 (new)** # paid @ \$55 _____ = Total \$ _____

Miscellaneous (Describe) _____ @ \$ _____ = \$ _____ = Total \$ _____

BOND CK# (If known) and/or BOND AMOUNT _____ \$

MAILING FINAL CHECK _____ TOTAL MONEY ENCLOSED WITH REGISTRATIONS \$ _____

NOTE: MAKE CHECKS PAYABLE TO: SRA (State Referee Administrator)

RETURN ALL PAPERWORK AND MONIES TO REGISTRATION ADMINISTRATOR (Christel Yant)

QUESTIONS? CALL CHRISTEL @ 303-881-1101 OR CHUCK @ 970-248-1478 W RECORD ANY COMMENTS ON THE BACK OF THE PAGE

MAIL TO: SRC c/o Christel Yant PO Box 495, Wheat Ridge, CO 80034