



Application Form
The Ontario Soccer Association
C1 Exam - April 19 2008
C1 Clinic - April 19-20, 2008

Note: This form must be completed and returned with the registration fee of \$100.00, no later than **Monday March 17, 2008**

***** PLEASE ATTACH A SOCCER RESUME *****

Name: _____

Sex: _____ M _____ F Years as a Class 2 Referee: _____

OSA Registrant Number: _____ Date of Birth: _____

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Business Phone: _____

E-Mail Address: _____

District in which you live: _____

Send to:
The Ontario Soccer Association
c/o Referee Development,
7601 Martin Grove Road,
Vaughan, ON L4L 9E4