



Temecula Valley Soccer  
Referee Association

## New Membership Application

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

City: \_\_\_\_\_ CA Zip Code \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

*(please print your email address neatly)*

Date of Birth: \_\_\_\_\_

USSF Certification Date: \_\_\_\_\_ Current Referee Grade: \_\_\_\_\_

Last 4 Digits of Referee ID#: \_\_\_\_\_

In signing this application I agree to hold Temecula Valley Soccer Referee Association, (henceforth know as TVSRA), its' assignor, and officers harmless for anything that occurs to me, or my property, while performing any task related to refereeing soccer matches assigned to me under the direction of TVSRA. I also understand that continued membership in TVSRA is contingent upon my compliance with the ethical and professional standards of the United States Soccer Federation and the TVSRA, as outlined in the directives and publications of said organizations.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(needed if applicant is under the age of 18)*

### Membership Fees for all Referees = \$40

Annual Renewal Membership Fees are non refundable and due January 1st of each year.

Applications can be turned in at the TVSRA  
Monthly meetings or mailed to:

**TVSRA**  
PO Box 891621  
Temecula, CA 92589