

**Knights Hockey Club Hockey Referee Application
Level 1 (Returning) Season: 2021/2022**



Please PRINT LEGIBLY

Postal Code:

Name: _____ Age: _____ Birth Date: _____

Address:

Email:

Home Phone #: _____ Cell#: _____

Association: _____ Last Season's Team: _____

Number of years previously officiated: _____

Highest Level as; Referee: _____ Highest Level as; Linesman: _____

What do you consider your officiating strengths? _____

What areas of officiating do you know you need to work on? _____

Experienced Level 1's are encouraged to pass on their newly acquired knowledge to the "new official". Give me an example of a situation where you passed on what you already know? Tell me how it made you feel and how the other official took your input. _____

Tell me one difficult refereeing situation you encountered last season and how you successfully handled the situation. Add an additional page if required.

Signature

Date

Email signed Application **WITH YOUR NAME IN THE SUBJECT LINE**

to: Referee Assignor averes@czrc.ab.ca