 **South East London & Kent Youth Football League   
Season 2017/18**

# Referee Registration Form

Please complete your details below, we ask that you enter the correct County Registration number for season 17/18 the number requested is the receipt number you receive, as confirmation of your affiliation payment for season 2017-2018.

The receipt number for the new season starts with the following letters **T-LON** this is followed by a number. Please do not enter your Fan number as we do not require this number and it does not confirm you have registered for season 2017-2018. Once you have completed the form please return it to the League Referee Secretary ([sally@selkentsecretary](mailto:dolanst@supanet.com)) as an e-mail attachment.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full Name:** |  | | **County Registration:**  **Receipt Number:** | T-LON |  |
| **Contact Number:** |  | | **County you have Registered with** |  | |
| **Email Address:** |  | | **Current Referee Level:** |  | |
| **Age & Date of Birth:** |  |  | **DBS Certificate Number:**  (**Referees 16 and above**) |  | |
| **Address & Postcode:** |  | | | | |
| **Do you have your own Transport:** | Yes No | | **I agree to complete the on line Referee match card for all appointments** | Yes | |

**Please indicate your preferred age groups by marking the appropriate boxes:  
(Please note that although you tick a box below we may appoint you to a game age relevant)**

|  |  |  |
| --- | --- | --- |
| **11-A-Side** | **11-A-Side** | **9-A-Side** |
| * U13 | * U16 | * U11 |
| * U14 | * U17 | * U12 |
| * U15 | * U18 to U21 |  |

|  |  |
| --- | --- |
| **Club Association: Are You a Member, or Related to a Member of a Club in this League.** Yes No | |
| **Club Name:** |  |
| **Position: (i.e. Parent, Player, Manager etc)** |  |
| **Signed:** |  |
| **Date:** |  |