

REFEREE SIGN ON SHEET



DATES COVERED BY THIS RECORD

FROM: _____

VENUE COVERED BY THIS RECORD

MATCH & REFEREE DETAILS

DATE	AGE	DIV	HOME TEAM	v	AWAY TEAM	NAME OF OFFICIAL	Referee must sign SIGNATURE	PLEASE TICK						
								CENTRE	ASST. 1	ASST. 2	NDSRA OFFICIAL	CLUB REF.	UNOFFICIAL	

REFEREE SIGN ON SHEET MUST BE COMPLETED BY NDSRA REFEREES. IF SHEET IS NOT COMPLETED ACCURATELY, PAYMENT FOR SERVICES WILL BE WITHHELD.

REFEREE MUST INDICATE THEIR DUTIES FOR EACH GAME (CENTRE OR ASST. REF) AND THEIR OFFICIAL STATUS/AFFILIATION.

CLUBS MUST SUBMIT ORIGINALS WITH THEIR TEAM SHEETS EACH WEEK. THE ASSOCIATION WILL ACCEPT SCANNED ORIGINALS PROVIDED THEY CONTAIN SIGNATURES OF OFFICIAL REFEREES