**World U19 Men’s Field Lacrosse Championships 2020**

Application to Officiate or Assess at the World U19 Men’s Field Lacrosse Championships

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| **Personal Details** |
| **Name** |  | **Date of Birth** |  / /Day Mo Yr |
| **Address** |  | **Apt/Unit** |  |
| **City** |  | **Prov.** |  | **Postal Code** |  |
|  |
| **Telephone** |  |  |  |  |
| **Home** | **Office** | **Fax** | **E-Mail** |
| **Height** |  | **Weight (lbs)** |  |  |

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| **Position** |
| **Referee** |  |
| **Assessor** |  |

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| **Certification Information** |
| **Provincial Member Association** |  |
| **Referee Certification Level** |  |  |  |
| **Field** | **Box** | **Date of Last Clinic Attended** |

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| **Confirm that you are able to attend the selection camp listed below.**  |
| **September 1, 2019 Weekend – Kelowna BC** |  |

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| **Member Association Approval** |
| **I hereby approve this application for consideration by the World’s Selection committee and attendance at First Nations/Alumni Cup in September 2019.** |
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| **Name (Print)** | **Signature** | **Title** | **Date** |
| ***Office Use Only*** |
| **Date Received** |  | **Updated** |  |
| **Approved** |  | **Rejected** |  |
| **Camp Attending** |  | **Fee Received** | **Yes 🞏****No 🞏** |

**To help us review your officiating/assessing career, please complete the following sections in detail**.

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| **Officiating/Assessing Experience - Field Lacrosse** |
|  | **Year(s)** | **Comments** |
| **World Championships** |  |  |
| **European Championships** |  |  |
| **National Championships** |  |  |
| **Provincial Championships** |  |  |
| **Other Major Tournaments** |  |  |

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| **Officiating/Assessing Experience - Box Lacrosse** |
|  | **Year(s)** | **Comments** |
| **World Championships** |  |  |
| **National Championships** |  |  |
| **Provincial Championships** |  |  |
| **Other Major Tournaments** |  |  |

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| **Officiating/Assessing Experience - Other** |
| **Sport** | **Year(s)** | **Comments** |
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| **Officiating/Assessing Experience - Administration** |
| **Please detail any administrative experience that you have had including, formal positions held (i.e. RIC), Teaching Clinics, Supervisory and other program related experience** |
| **Title** | **Year(s)** | **Comments** |
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| **Other Experience or Pertinent Information** |
| **Please detail any other experience or pertinent information that you feel would make you a strong candidate to referee at the World Championships** |
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| **International Travel** | **Yes** | **No** |
| I am legally entitled to hold a Canadian Passport |  |  |
| I currently have a criminal record or pending criminal charges. |  |  |

I herby certify that to the best of my abilities, the information that I have provided in this application is true and accurate.

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| Signature |  | Date |

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| **In order to be considered, please return this application by no later than April 30, 2019****Late applications will not be accepted.****The application fee of $200.00 will be refunded only if you are not invited to a selection camp. All fees are due at the time of the application.** | **Please forward your completed application and fee to** James Buhlman (james@lacrosse.ca)Canadian Lacrosse AssociationGladstone Sports & Health Centre Suite 31018 Louisa StreetOttawa, ON K1R 6Y6 |