

Referee Assignor Certification Form

To be Completed by the Hosting Organization

Please Type or Print Clearly

Attach copies of your Application to Host Form and your Hosting Agreement and send to your Referee Assignor.

Tournament Name CLS SUMMER FESTIVAL

Hosting Organization CLS

Location(s) of Tournament 137 LINE ROAD MAVERICK, PA 19355

Date(s) of Tournament AUGUST 29 & 30, 2026

Signature of President of Hosting Organization Jeff Morris

Date MARCH 6, 2026

Signature of Tournament Director Jeff Morris

Date MARCH 6, 2026

To be Completed by the Appropriate Certified Referee Assignor
(Please Complete and Return to Hosting Organization)

Local Referee Chapter _____

Assignor's Name _____

Address _____

Phone _____

Email address _____

By signing below, I certify the availability of a sufficient number of officials for the tournament identified above within the guidelines of US Youth Soccer and EPYSA.

Signature of Certified Referee Assignor _____

Date _____

By signing below, I am stating that I CANNOT certify the availability of a sufficient number of officials for the tournament identified above for the following reason(s):

Signature of Certified Referee Assignor _____

Date _____

Note to Hosting Organization: This form must be attached to your Application to Host Form in order for your Tournament Application to be considered complete.