

Parkview Volleyball 2010 Referee Data Sheet and Availability

Name _____
Address, City, ZIP _____
Home Phone _____ Cell Phone _____ Work Phone _____
Email Address _____ Social Security # _____

Certification / Experience / Preferences: (Check all that apply)

USA In Training _____ Provisional _____ Regional _____ Jr. National _____
WIAA Level _____ License # _____ Years Exp. _____

Additional Experience / Comments: _____

Preferred Gyms if any: _____

Preferred partners if any: _____

Refs you prefer not to work with if any: _____

Availability: Check all that apply

Saturday	Sept. 11	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Sept. 12	NOON-5PM	_____		_____
Saturday	Sept. 18	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Sept. 19	NOON-5PM	_____		_____
Saturday	Sept. 25	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Sept. 26	NOON-5PM	_____		_____
Saturday	Oct. 2	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Oct. 3	NOON-5PM	_____		_____
Saturday	Oct. 9	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Oct. 10	NOON-5PM	_____		_____
Saturday	Oct. 16	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Oct. 17	NOON-5PM	_____		_____
Saturday	Oct. 23	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Oct. 24	NOON-5PM	_____		_____
Saturday	Oct. 30	9 AM-1 PM	_____	1PM-5PM	_____
Sunday	Oct. 31	NOON-5PM	_____		_____

Comments:

Please return this form no later than Friday July 23, 2010 to:

Roger Lewicki Home Phone 262-679-0502
W176S8670 Nature Court Cell Phone 262-894-0093
Muskego, WI 53150 Work Phone 262-787-7328
email rogerlewicki@hotmail.com