

# WORCESTERSHIRE FOOTBALL ASSOCIATION



## COURSE APPLICATION FORM

Please use one application form per person per course.  
 \* Delete as Applicable

NAME ..... DATE OF BIRTH ..... AGE .....

ADDRESS .....

..... POSTCODE ..... GENDER M/F\*

HOME TELEPHONE: ..... MOBILE TELEPHONE.....

E-MAIL .....

CLUB/ORGANISATION (If Applicable) .....

COURSE NAME **11-A-SIDE REFEREE COURSE\* or MINI SOCCER COURSE\* or FUTSAL\***

COURSE DATE .....

COMPLETION OF THE FA CHILD PROTECTION WORKSHOP YES/NO\*  
 CERTIFICATE NUMBER & DATE .....

COMPLETION OF THE FA CRB DISCLOSURE YES/NO\*  
 DISCLOSURE NUMBER & DATE .....

The Football Association offers a number of referee training courses to suit your individual needs. By taking the time to complete this questionnaire, we will be in a better position to offer a course to suit your personal needs. Please complete all sections and answer all questions. Please see the enclosed information sheet giving details of the courses available. The minimum age for Referees is 14 years.

**Please remember that all referees are required to attend an FA Child Protection Best Practice Workshop and complete an FA Criminal Records Bureau (CRB) Enhanced Disclosure check.**

### I am interested in attending an FA Referee Training course to:

Please check appropriate box(es)

- |  |                             |                          |
|--|-----------------------------|--------------------------|
| <input type="checkbox"/> Referee 11-a-side Football  | Referee in FUTSAL           | <input type="checkbox"/> |
| <input type="checkbox"/> Referee Small Sided Football  | Referee in Mini Soccer      | <input type="checkbox"/> |
| <input type="checkbox"/> Referee in Women's/Girls Football   | Referee in Youth Football   | <input type="checkbox"/> |
| <input type="checkbox"/> Gain further knowledge on the Laws of the Game as a general interest  | Referee Disability Football | <input type="checkbox"/> |
| <input type="checkbox"/> Take an examination on the Laws of Association Football as part of a qualification I am studying for e.g. Duke of Edinburgh Award, Coaching etc |                             |                          |

### I am only available to attend a course during the following times:

Please tick the appropriate box(es)

- Weekday Evenings  Weekday Daytime  Weekends  Any

### Other helpful information

Have you any connection with the game e.g. as a player, manager etc?		Yes/No*	
If yes, Name of Club(s)			
Have you previously been examined as an Association Football Referee?			Yes/No*
If Yes, please state name of Examining Association		Date or Year	

**Equal Opportunities Monitoring – Optional**

**Ethnic Background** – Please choose one category from A to E and then tick the appropriate box to indicate your ethnic background

Prefer Not to Say

- | <b>A. White</b>                   | <b>B. Mixed</b>                                | <b>C. Asian or Asian British</b>     | <b>D Black or Black British</b>    | <b>E Chinese or other Ethnic</b> |
|-----------------------------------|--|--------------------------------------|------------------------------------|----------------------------------|
| English <input type="checkbox"/>  | White & Black <input type="checkbox"/>         | Indian <input type="checkbox"/>      | Caribbean <input type="checkbox"/> | Chinese <input type="checkbox"/> |
| Irish <input type="checkbox"/>    | White & Black African <input type="checkbox"/> | Pakistani <input type="checkbox"/>   | African <input type="checkbox"/>   | Other <input type="checkbox"/>   |
| Scottish <input type="checkbox"/> | White & Asian <input type="checkbox"/>         | Bangladeshi <input type="checkbox"/> | Other <input type="checkbox"/>     |                                  |
| Welsh <input type="checkbox"/>    | Other <input type="checkbox"/>                 | Other <input type="checkbox"/>       |                                    |                                  |
| Other <input type="checkbox"/>    |  |                                      |                                    |                                  |

**Disability**

Prefer Not to Say

Do you consider yourself a disabled person? Yes  No

- |  |   |
|--|---|
| Visual impairment <input type="checkbox"/>   | Mental health issues <input type="checkbox"/>             |
| Hearing impairment <input type="checkbox"/>  | Learning disability/difficulties <input type="checkbox"/> |
| Physical impairment <input type="checkbox"/> |   |

**Religion**

Prefer Not to Say

- |   |  |
|---|--|
| None <input type="checkbox"/>                                 | Christian (including Church of England, Catholic, Protestant and all other Christian denominations) <input type="checkbox"/> |
| Buddhist <input type="checkbox"/>                             | Hindu <input type="checkbox"/>   |
| Jewish <input type="checkbox"/>                               | Muslim <input type="checkbox"/>  |
| Any other religion (please write in) <input type="checkbox"/> | Sikh <input type="checkbox"/>  |

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Please find enclosed a cheque/postal order for £..... payable to "Worcestershire FA". I agree to abide by the course regulations and I understand that once confirmation letters have been issued, should I wish to withdraw either before or after the commencement of the course, a refund will only be given in exceptional circumstances and that neither The Football Association, the Worcestershire Football Association, nor their servants, agents or employees are under any liability in respect of injury, loss or damage, which I may sustain.

SIGNED..... DATE: .....

**PLEASE RETURN BOOKING FORM TO: - WORCESTERSHIRE FOOTBALL ASSOCIATION, CRAFTSMAN HOUSE, DE SALIS DRIVE, DROITWICH SPA, WR9 0QE**