

## THE ONTARIO SOCCER ASSOCIATION

## Referee Report - Dismissal Form

This form must be used by a referee for each dismissal issued. This form must be submitted to the appropriate authority within 48 hours of the game or earlier if stipulated by the rules of the competition. In any case involving physical contact with a game official, the Referee Assault Report Form must be used.

## PLEASE PRINT

GAME NUMBER:	AME DETAILS		
GAME: (Home Team)	VS. (Away Team)		
LEAGUE/COMPETITION:	AGE GROUP:	DIVISION:	
DISTRICT ASSOCIATION (If Applicable):	AGE GROOT.	DIVISION.	
PLAYED AT:	DATE:		
(Field Name and City/Town)	——————————————————————————————————————	(DD/MM/YR)	
DI	LAYER DETAILS		
PLAYER'S NAME:	OSA REGISTRANT NUMBER:		
JERSEY NO.: TEAM NAME:		TEAM REGISTRATION NUMBER:   T   -       -	
☐ Denied the opposing team a goal or an of ☐ Denied an obvious goal-scoring opportunity by a free kick or penalty kick  Check this box ☐ if the misconduct was direct the incident described below occurred after	nity to an opponent moving towards t		
DESCRIPTION OF INCIDENT: Please use I	back of form to provide the description	on of incident.	
	CFEREE DETAILS		
RE Referee: Print your Name		gnature of Referee	
Referee: Print your Name		gnature of Referee	
Referee:		gnature of Referee Date	

