



# Ohio South Youth Soccer Association

## Post-Tournament Assignor Report

Tournament Name:

Tournament Dates:

BOYS						GIRLS					
	No. of Teams Tournament was approved to accept *	No. of Teams Tournament Accepted *	No. of Games Day 1 *	No. of Games Day 2 *	No. of Games Day 3 *		No. of Teams Tournament was approved to accept *	No. of Teams Tournament Accepted *	No. of Games Day 1 *	No. of Games Day 2 *	No. of Games Day 3 *
U8						U8					
U9						U9					
U10						U10					
U11						U11					
U12						U12					
U13						U13					
U14						U14					
U15						U15					
U16						U16					
U17						U17					
U18						U18					
U19						U19					
Adult						Adult					
<b>TOTAL</b>						<b>TOTAL</b>					

<b>No. of Officials</b>	
<b>No. of Venues</b>	
<b>No. of send offs (RED CARDS)</b>	
<b>No. of games covered by Two USSF Referees &amp; 1 Club Linesman *</b>	
<b>No. of games covered by One USSF Referee &amp; 2 Club Linesmen *</b>	

**Submitted by:**  
(PRINT)

**Date:**

This form must be completed by the Tournament Referee Assignor with 30 days after the conclusion of the tournament and sent to the Ohio South SYRA. email: [syra@ossr.com](mailto:syra@ossr.com).