

Tracking Number:

## PIMA COUNTY JUNIOR SOCCER LEAGUE SUSPENSION FULFILLMENT FORM

Dear Referee,

Your cooperation is required in ensuring that players under suspension complete the full term of their suspension before they can resume play. PCJSL thanks you in advance for your assistance.

Player: \_\_\_\_\_ ID# | 0 | 2 | 0 | 1 | | | | | | | |

Team: \_\_\_\_\_ Club Name: \_\_\_\_\_.

The D&R Committee imposed the following sanctions for the committed offense:

**Suspension** \_\_\_\_\_ **Game(s)**      **Probation** \_\_\_\_\_ **Game(s)**

The suspension began on \_\_\_/\_\_\_/\_\_\_ and the player must **SIT OUT/NOT PARTICIPATE** in his/her next \_\_\_\_\_ game(s). Please fill out the first empty box below to indicate that the above named suspended player **DID NOT PARTICIPATE** with his/her team in the game you officiated.

One game box should be filled out for every game the player sits out.

Dear Coach:

After this form is complete, i.e. the player has not participated in the total number of games of his/her suspension as attested to by the center referees below, send the form (you may use fax) immediately to:

PCJSL c/o Detlef Lange  
4471 N. Cerritos Dr. Tucson, Az. 85745-9557  
Ph:743-9574 Fax 743-9967 Cell 419-4829

and your player's pass will be returned to you.

<b>Game 1:</b> (Circle One) League or Tournament Game      Field Location: _____ Game Date: ___/___/___    Time: ___:___    (Circle One) Player present, not dressed out / Player Absent Teams: _____ vs _____ <b>Referee:</b> Name: _____    Phone: _____    Signature: _____ Address: _____    City: _____    State: _____    ZIP _____
<b>Game 2:</b> (Circle One) League or Tournament Game      Field Location: _____ Game Date: ___/___/___    Time: ___:___    (Circle One) Player present, not dressed out / Player Absent Teams: _____ vs _____ <b>Referee:</b> Name: _____    Phone: _____    Signature: _____ Address: _____    City: _____    State: _____    ZIP _____
<b>Game 3:</b> (Circle One) League or Tournament Game      Field Location: _____ Game Date: ___/___/___    Time: ___:___    (Circle One) Player present, not dressed out / Player Absent Teams: _____ vs _____ <b>Referee:</b> Name: _____    Phone: _____    Signature: _____ Address: _____    City: _____    State: _____    ZIP _____
<b>Game 4:</b> (Circle One) League or Tournament Game      Field Location: _____ Game Date: ___/___/___    Time: ___:___    (Circle One) Player present, not dressed out / Player Absent Teams: _____ vs _____ <b>Referee:</b> Name: _____    Phone: _____    Signature: _____ Address: _____    City: _____    State: _____    ZIP _____