



Ohio Travel Soccer League Referee Complaint Form

This form is to be utilized when an individual has a concern to be reported to OHTSL regarding a referee.

Name of Individual Reporting Concern: _____

Contact Info (email & phone) : _____

Game Date/Time: _____ Age/Division of Play: _____ Gender: Girls Boys

Home Community: _____ Away Community: _____

Did the referee know and adhere to OHTSL rules: Yes No

Did the referee give clear instructions when making calls to players: Yes No

Other than simply not linking the calls the referee made what is prompting this report:
