

**2019-2020 MVKWA Referees Payment Form**

This form is due at the November 24 Tournament Workers Meeting.  
 All the OHSAA (certified) referees names must be on this form in order for the team to be paid.  
 If a team turns in this form after November 24, that team might not get paid until November 2020.

**Starting Last Year and Continuing This Year:**  
 > as mandated by Fed. Gov't bill: <https://www.congress.gov/bill/115th-congress/senate-bill/534/text>  
 > OHSAA referees and Other referees that are out of high school must have these USA Wrestling items:  
 1. 0\$ USA Wrestling background check  
 2. \$0 USA Wrestling Safe Sport certification (3 certificates from 3 part online class)  
 3. One USA Wrestling Membership card: \$0 Event Volunteer -OR- \$35 Limited Wrestling Leader

- NOTES:**
- Fill out one of these forms for each MVKWA Meet hosted.
  - 10, 13 or 15 Referees for a Mini-Tournament, 12 Refs for Regional (#refs/#mats: 10 refs/8 mats, 12 refs/10 mats, 15 refs/12 mats)
  - 1 Certified Trainer if less than 450 wrestlers scheduled in meet
  - 2 Certified Trainers if more than 450 wrestlers scheduled in meet
  - "Certified Trainer" is an AT (certified), BOC, EMT or a JH, HS or College Athletic Trainer
  - Make a copy of this form to keep for yourself and your team.
  - Send this completed form to:  
 MVKWA Referees  
 Attn: John Sopczak  
 2040 Crystal Marie Dr.  
 Beavercreek, OH 45431
  - For questions call/text: John Sopczak 937-321-4169
  - OT: If a Mini-Tournament lasts over 3.5 hours, the host team pays the referees overtime from the host's teams entry fees at \$15 for each 1/2 hour over 3 hours.
  - OT: If a Regional Tournament lasts over 4.5 hours, the host team pays the referees overtime from the host's teams entry fees at \$15 for each 1/2 hour over 3 hours.

Type (circle one):    Mini-Tournament                      Regional Tournament

High School Area: \_\_\_\_\_

Tournament Date: \_\_\_\_\_ Meet Site: \_\_\_\_\_

List Name and \$ for each Referee		Mini-Tournament		Regional Tourn.	
Official's Name	Text Phone	OHSAA Ref	Other Ref	OHSAA Ref	Other Ref
1 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
2 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
3 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
4 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
5 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
6 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
7 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
8 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
9 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
10 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
11 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
12 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
13 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
14 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**
15 _____	(____) _____ - _____	\$85	\$40**	\$125	\$60**

Certified Trainer's Name	Text Phone	OHSAA Ref	Other Ref	OHSAA Ref	Other Ref
_____	(____) _____ - _____	\$150	N/A	\$150	N/A
_____	(____) _____ - _____	\$150	N/A	\$150	#2 if > 450 wrestlers

\*\* Add \$15 for each "Other Ref" that is a HS wrestler:    \$ \_\_\_\_\_    \$ \_\_\_\_\_  
 =====                      =====                      =====                      =====  
 \$ Money Totals:    \$ \_\_\_\_\_    \$ \_\_\_\_\_    \$ \_\_\_\_\_    \$ \_\_\_\_\_

\*\* The \$15 added to HS wrestlers that are "Other Ref"s is for host team to buy a USA Wrestling \$15 Limited Folkstyle Athlete Membership (Wrestler Card). The host team MUST show these USAW Cards to the Head Referee before the meet starts.

- + \$ \_\_\_\_\_ Total of All Officials & the Trainer from Above
- + \$ \_\_\_\_\_ Plus Skin/Nails/Hair Check/Refs (\$60/8 mats, \$80/10 mats, \$120/12 mats)  
 > # Refs Checking: 3 if 8 mats, 4 if 10 mats, 6 if 12 mats
- + \$ \_\_\_\_\_ Plus Ref Gas \$ if Bruce Doll tells you = \$10 per OHSAA referee
- \$200 Minus Amount Voted In at 02/16/2011 Meeting to Host an MVKWA Meet
- \$100 Fine - If USAW Meet, Club/Insurance or Coach's Card NOT done by Nov. 18, 2018

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\$ \_\_\_\_\_ Total Amount Due to Team from the MVKWA:

Name to make check payable to: \_\_\_\_\_  
 Send check to: Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

[Form revised: 9-11-2019]