Squash New Zealand

TOURNAMENT REFEREE - REPORT FORM

This form should be returned to the Squash NZ national office within 14 days of the event.

1  Name of Tournament Referee: _____________________________________________

   Number of National Referees Used: __________________________________________

   Number of District Referees Used: __________________________________________

   All referees used are listed on the attached page.

2  Event: __________________________

   Date of event: ______________________

3  Venue: __________________________

   District: __________________________

   Tournament Controller Names: __________________________

4  Number of Draws: __________________

5  An assessment of the courts is provided on the attached page

6  Particular notes about the Squash Club which were considered prior to the start of games e.g. specific referees room, layout, emergency exits, warm up rooms etc.

   _______________________________________________________________________

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   _______________________________________________________________________
Particular notes about the First Aid Kit, Ice Packs, Official Clock etc.

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7 Were all referees code of ethics completed prior to the start of their refereeing? Yes or No
   If no what was done to rectify this?

__________________________________________________________________________

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8 Were the available resources easily accessible from the Tournament Director? Yes or No
   If no what was done to rectify this?

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9 How were referees allocated to matches?
   Do you believe all referees were allocated to matches equally, if not why?
   Ensure a copy of allocations is provided with your report.

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10 Were there any unusual problems encountered with refereeing during the event – and if so,
    how were they resolved?

__________________________________________________________________________

__________________________________________________________________________
The overall standard of refereeing at the event was:
☐ Excellent  ☐ Good  ☐ Fair  ☐ Below average  ☐ Poor

Comments:
__________________________________________________________________________

Player behaviour, court attire, unnecessary defaults etc.: Ensure a code of conduct form is completed alongside this:
__________________________________________________________________________
__________________________________________________________________________
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How was the relationship between the Tournament Referee and Tournament Director:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

General comments:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Signature of Tournament Referee:
__________________________________________________________________________  Date: __________________


Courts Issues

Court Number/ Name____________________________________

Please provide a description on the following areas of the court:

Seating/Viewing of court for referees and spectators e.g. capacity, suitability etc.: _______________
_______________________________________________________________________________
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Court Walls, Floors, Lighting, Doors etc.
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<thead>
<tr>
<th>Referee Name</th>
<th>District or National Referee</th>
<th>Number of Games Refereed</th>
<th>Number of Games Assessed on</th>
<th>3-referee position taken (if any)</th>
<th>Standard of Refereeing/Comments/Complaints</th>
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