

The Wigan Cup Competition Sponsored by Blackstone Insurance Founded in 1885

Secretary W Hudson 8 Scar End Close Weir Village Nr Bacup OL13 8GD Tel 01706 876299 Email wigancup@aol.com

Referee Assessment Form.

Home Team ______ v Away Team _____

Date of Game _____ Name of Referee. _____

General Control of the game.

Overall, and ignoring any isolated incidents, was the referees control of the game satisfactory? Was he confident, did he deal with major incidents in a calm manner? Were his signals understandable? Was he over fussy? Did he have a firm control of situations?

Application of the laws of the game.

Do you consider that the referee applied the laws of the game and that his decisions, overall, were correct? Was the positioning appropriate so that he had the best view possible the judge incidents within play. Did he attempt to apply advantage where appropriate?

I / We award the referee marks out of a maximum of 100

Signed _____ Club____

Please send this form by email to wigancup@aol.com or post to the above address.

8/10