

BRIDGE CITY UMPIRES REGISTRATION FORM



NAME _____

ADDRESS _____

PHONE NUMBER _____

EMAIL _____

AGE _____

THE FOLLOWING INFORMATION WILL HELP WHEN WE ASSIGN YOU TO GAMES

YEARS OF SOFTBALL EXPERIENCE AS A PLAYER OR COACH _____

DO YOU HAVE AN OFFICATING EXPERIENCE IN OTHER SPORTS? IF SO PLEASE EXPLAIN

How many weekday evenings per week would you be available? _____

Can you work tournaments on weekends? _____

Thank you for your interest in being an umpire and part of our Association. We look forward to working with you and will get back to you with information on how to begin. Please email this form to

laloehndorf@gmail.com.

