

## New Melle Umpire Registration Form

***(Please print legibly)***

Name: (last) \_\_\_\_\_ (first) \_\_\_\_\_ Male or Female

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

\*\*\*Scheduling will be done primarily by email\*\*\*

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Age: \_\_\_\_\_ (18 & older, enter "Adult") Total Years Umpiring: \_\_\_\_\_

Umpired at New Melle? \_\_\_\_\_ Y \_\_\_\_\_ N Is W-9 form attached? \_\_\_\_\_ Y \_\_\_\_\_ N

Last Year's Pay Per Game? . . . . . \$ \_\_\_\_\_

Have you attended Umpire Clinics? \_\_\_\_\_ Y \_\_\_\_\_ N Where: \_\_\_\_\_

College Students: When will you be available for umpiring? \_\_\_\_\_

**HIGHEST LEVEL UMPIRED:**

8U-9U          10U-11U          12U-13U          14U-15U

Baseball: 1) Atom \_\_\_\_\_ 2) Bantam \_\_\_\_\_ 3) Midget \_\_\_\_\_ 4) Juvenile \_\_\_\_\_ 5) 18 Yr+ \_\_\_\_\_

Softball: 1) 8 Und \_\_\_\_\_ 2) 10 Und \_\_\_\_\_ 3) 12 Und \_\_\_\_\_ 4) 14 Und \_\_\_\_\_ 5) 16Und+ \_\_\_\_\_

**WHICH DAYS/EVENINGS ARE YOU AVAILABLE TO UMPIRE? INDICATE WITH X**

	SUN	MON	TUE	WED	THUR	FRI	SAT
DAY							
EVENING							

Do you play in any Leagues or High School Ball? \_\_\_\_\_ Y \_\_\_\_\_ N If you have a Schedule of Game Dates, please attach it to this profile. We will try to schedule accordingly.

Have you been informed of Proper Dress Code? \_\_\_\_\_ Y \_\_\_\_\_ N

**Hold Harmless Agreement**

I agree to indemnify and save harmless the City of New Melle from any claim, damages, or loss sustained by reason of participation in the Baseball/Softball Umpire Program, and hereby assume the risk of and hereby release the City of New Melle, its officers, the coordinators, managers, parents, or any other individual, from any claim, damage, or loss by reason of any accident, injury, or damage to me or any person or property happening during the course of participating in the activities of the Baseball/Softball Umpire Program.

The umpire, or parent or guardian of the umpire if umpire is minor, states that they are adequately covered by their own personal insurance or elsewhere for incidents and accidents that may arise during games or practices. By signing below, you are agreeing to accept the above terms and conditions.

Name of Umpire: \_\_\_\_\_

Signature of Umpire: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Legal Guardian if Umpire is a minor under the age of 18 years:

\_\_\_\_\_ Date: \_\_\_\_\_