

# BRANTFORD MINOR SOFTBALL ASSOCIATION

Box 24008, 185 King George Road, Brantford, ON N3R 7X3

www.brantfordsoftball.ca

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## UMPIRE APPLICATION

**Applicant Information:** **PLEASE PRINT**

Full Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Postal Code \_\_\_\_\_ D.O.B. \_\_\_\_\_

Email address \_\_\_\_\_

**Other Information:** **PLEASE PRINT**

Have you ever umpired before? \_\_\_\_\_ If yes, how long? \_\_\_\_\_

Have you ever attended an umpire clinic? \_\_\_\_\_ If yes, when and where? \_\_\_\_\_

Why do you want to be an umpire?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When are you available?

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

**References if available:** **PLEASE PRINT**

(1) \_\_\_\_\_  
NAME ADDRESS PHONE

(2) \_\_\_\_\_  
NAME ADDRESS PHONE

**I AGREE TO ABIDE BY THE CONSTITUTION AND BY-LAWS OF THE BRANTFORD MINOR SOFTBALL ASSOCIATION INC. AND TO ATTEND MEETINGS AND CLINICS AS REQUIRED.**

\_\_\_\_\_  
(Parent / Guardian, if under 18) \_\_\_\_\_  
(Applicant)

\_\_\_\_\_  
(Date) \_\_\_\_\_  
(Date)

**FOR ENQUIRIES, CONTACT: Tracy Oldroyd (519) 752 - 1750**