



2012 ASA

Chicago Metro

Umpire Registration Form

Local Officials Assoc. _____

SUA _____

Application Type: Renewal New Updated (indicate w/ asterisk) Youth Umpire (under 18 years of age on Jan. 1, 2012)

Name: _____ Gender: M F Home Phone: _____
 Address: _____ Work Phone: _____
 City: _____ State: _____ Zip: _____
 Birthdate: _____ E-mail Address: _____ Cell Phone: _____

I Umpire the following Levels:	<input type="checkbox"/> FP <input type="checkbox"/> SP <input type="checkbox"/> Modified <input type="checkbox"/> CoEd	Adult Program(s) <input type="checkbox"/> FP <input type="checkbox"/> Modified <input type="checkbox"/> CoEd <input type="checkbox"/> 12" Slow Pitch <input type="checkbox"/> 16" Slow Pitch
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Please send the following Information: National Umpire Schools LOA's in my area Traveling to other Tournaments
 Other: _____

Umpire Experience		
Years Registered ASA: _____ (please include date and location where applicable)		
Elite Umpire Program <input type="checkbox"/> Elite	National Indicator Fraternity <input type="checkbox"/> N.I.F.	ASA Medals <input type="checkbox"/> Blue <input type="checkbox"/> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold
ASA Tournaments: (list last 4 tournaments in ea.) Metro: _____ Level: _____ Regional: _____ Level: _____ National: _____ Level: _____	Slow Pitch Experience: <div style="text-align: center;">16"</div> <input type="checkbox"/> 16" Major <input type="checkbox"/> 16" Class A <input type="checkbox"/> 16" Recreational <div style="text-align: center;">12"</div> <input type="checkbox"/> Super <input type="checkbox"/> Major <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> Industrial <input type="checkbox"/> Church <input type="checkbox"/> Recreational	IHSA Softball: Last Certified Clinic: _____ Level Worked <input type="checkbox"/> Var <input type="checkbox"/> JV <input type="checkbox"/> Fresh Post Season: <input type="checkbox"/> Regional <input type="checkbox"/> Sectional <input type="checkbox"/> State <input type="checkbox"/> IESA State Collegiate Softball: Level: <input type="checkbox"/> D-I <input type="checkbox"/> D-II <input type="checkbox"/> D-III <input type="checkbox"/> NJCAA Regional: <div style="text-align: right;">(year) (level)</div> Regional Umpire Clinic: _____
ASA Umpire Schools: (last year attended) Metro: _____ National: _____ Adv. National: _____ ISF Qualifier: _____ ISF Certified: _____		

ASA registration fee for 2012 is: **\$ 45.00**

Youth Umpire Registration (under 18 years of age on January 1, 2012): **\$35.00**

Add for All-Sport Insurance: (Liability, Medical, Save Pay) **\$30.00**

Make Checks Payable to: ASA Chicago Umpire

Remit to your Local Officials Association representative or mail to the UIC:

ASA Chicago Metro Fast Pitch UIC

Steven L. Verive

2450 Coach and Surrey Lane

Aurora, IL 60506-4452

For Office Use Only

Fees: _____ Rule Book: _____ ASA Card: _____ Date Filed: _____ Date Mailed: _____