



## UMPIRE REGISTRATION

FIRST NAME:

LAST NAME:

ADDRESS:

CITY:

ST:

ZIP:

CELL PHONE:

ALT NUMBER:

EMAIL:

Social Security #:

Date of Birth:

*\*a 1099 form will be sent each January for yearly earnings*

### UMPIRE STATUS:

- Beginning Umpire Candidate
- Returning Experienced Umpire
- New Experienced Umpire to AU
- Years of Experience

### AVAILABILITY (Days of the Week):

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

### AGE PREFERENCE:

5-6  7-8  9-10  11-12  13-14  Highschool  College  Adult  
or  ALL AGES

SEASONS:  Spring  Summer  Fall

### WORK AGREEMENT:

I understand that the Atlanta Umpires is an organization dedicated to providing scheduling and payment services for various youth and adult leagues. I agree to accept assignments as verbal contracts, to work as scheduled, to assume responsibility to report income earned as required by governmental agencies, and to conduct myself in a manner which does not discredit the reputation of the umpire organization I represent.

SIGNED:

DATE: