



AMATEUR SOFTBALL ASSOCIATION

2801 N.E. 50th Street
Oklahoma City, OK 73111-7203
(405) 424-5266 • Fax (405) 424-3855
http://www.softball.org

ATTACH
PASSPORT
PHOTO TO
ONE COPY

NATIONAL CHAMPIONSHIP
UMPIRE AGREEMENT

Note: Please complete this form in full and print out four copies. Ensure that you sign all four copies. Keep one copy for your records and mail the other three copies to your state/metro UIC who will forward all copies to the Regional UIC. The Regional UIC will then forward to the following: National Championship UIC (copy with photo), National Championship Umpire Coordinator, and ASA National Office. THIS FORM MUST BE RETURNED WHETHER ACCEPTING THIS ASSIGNMENT OR NOT. Fill in, type or neatly print. Complete this box whether accepting or declining.

PERSONAL INFORMATION

Name
Street
City State Zip
Telephone - Home
Telephone - Business
E-Mail

Championship Assigned
Dates
Location
State/Metro Commissioner
State/Metro Association
Region Number
Assignment Category
Host At Large
Host Exchange Rotation

Accept Decline
IF YOU ACCEPT THIS ASSIGNMENT, YOU MUST COMPLETE THE REMAINING SECTIONS OF THIS AGREEMENT.

TRAVEL INFORMATION (If by air, contact ASA Travel Service at (800) 972-3074 after June 1 for arrangements)

I will be arriving by: Plane Car Other Date
If you do not use ASA Travel Service for airline travel, you will be responsible for your ticket. If traveling by car, a travel voucher must be submitted within 60 days of the assigned championship to be reimbursed. Reimbursement for car travel shall not exceed air travel fare. Submit your flight information to the championship umpire coordinator at least 30 days prior to your arrival date.

HOUSING INFORMATION (The local umpire coordinator will make reservations for you based on the information below)

Smoker Non-Smoker Age Sex
I will arrive alone with family If bringing family, please list the number of rooms required:
Note: If my family accompanies me, I understand I am responsible for their housing. This information assists in assigning rooms while attending the championship.

PAST UMPIRE EXPERIENCE (Indicate the number of ASA tournaments/championships)

Table with 7 columns: Adult SP, Adult FP, Youth SP, Youth FP, Modified, 16-Inch. Rows include State/Metro Tournaments, Regional Tournaments, National Championships, Total games umpired last year, Years as ASA Umpire, Year of last umpire school attended.

REMARKS

I have accepted the National Championship assignment as indicated above and agree that all information on this form is correct. I can be contacted at any time at the address or phone number listed. I also agree to attend the pre-championship clinic as indicated on the information form and will be available the entire championship for any and all assignments. Should I cancel after accepting this assignment, not return this form, or not show at the championship, I understand that no national championship assignments will be available for two to five years.

Umpire's Signature Date