

LAFAYETTE AREA UMPIRES ASSOCIATION

APPLICATION

NAME _____

ADDRESS _____

CITY/STATE _____

HOME PHONE _____

WORK PHONE _____

CELL PHONE _____

SOC-SEC-NBR _____

NIGHTS AVAILABLE (CIRCLE)

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

AVAILABLE WEEKENDS (CHECK) YES _____ NO _____

DUES: NATIONAL \$50.00

STATE \$10.00

LOCAL \$ 5.00

DATE PAID _____