# Goddard Recreational ball club

***Jake Simler Commissioner of umpires 316-204-3064*** [***jsimlergjbl@gmail.com***](mailto:jsimlergjbl@gmail.com)

***Mike Walker President 316-259-1956 mwalkergjbl@gmail.com***

***www.goddardrecreationalballclub.com***

# Umpire Registration/Application Form

Write-Type-Circle-Highlight-Check answers to all queries as requested and mail form to P.O. Box 656, Goddard, KS 67052. You can also scan and e-mail form to mwalkergjbl@gmail.com

Incomplete/missing information may delay/deny consideration

**Last Name: First Name: Complete Address: Date of Birth: Grade *(current or completed)*: School: Quickest Way to reach you:** D **Home-Phone** D **Cell-Phone** D **E-Mail** D **Other**

**Home#: Cell #:**

**E-Mail:**

**Prior Umpiring Experience** *(provide additional info, if needed, on back of page)***:** D**Baseball** D**Softball** D**NONE**

**League Name: Town, State: Year(s): League Name: Town, State: Year(s): *Please note that you are required to attend all Umpire meetings and Instructional Clinics***

You will be required to work the make-up games you were scheduled to work.

**RELATIVES IN LEAGUE:** *Please provide name(s) of any relatives currently participating in the league.*

### D Name: Grade: DManager DCoach Relationship D Name: Grade: Relationship D Name: Grade: Relationship

{Please indicate your relationship to the Manager/Coach/Player – i.e. parent, guardian, brother, sister, cousin, etc., continue on back if necessary}

**Do you** D *drive* or D *depend on someone* to drive you?

**Do you have a job?** D *Part-time* D *Full-time* – Town Position **Do you participate in school sports?** D*Yes* D*No* D*Jr.Varsity* D*Varsity* Which sport(s): **Any other scheduled activities that require your time during weekday evenings?** Do you need a D *Set* D *Flexible* Schedule? Days of Week you D *Are* D *Are not* Available: M T W T F

**Short notice:** Can you umpire on the day of a call? D *Yes* D *No* Can you umpire the next day? D *Yes* D *No*

**Any other Information you believe important or wish to share?**

I agree that all information provided is true & accurate to the best of my knowledge. I am aware that this position requires independence, and is performed with minimal supervision, while adhering to all codes, rules & regulations pertaining to the position in spirit and intent.

Signature:

Date:

Completion of application form is not a guarantee of acceptance.

REV - 2022