

## Official's Application

**CIRCLE THE SPORT YOU WOULD LIKE TO OFFICIATE:** (circle ALL that apply)

Youth Basketball

Youth Volleyball Camp

Adult Slow Pitch Softball

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### Personal Information:

Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Male or Female: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Other Names (maiden, alias, etc.): \_\_\_\_\_

Home Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

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### Qualifications:

What sports have you played?

Sport

Age Level

# of years

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What sports have you coached?

Sport

Age Level

# of years

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What sports have you officiated?

Sport

Age Level

# of Years

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Are you CPR and/or First Aid certified? Yes No

If yes, Card Level/Title: \_\_\_\_\_ Expires: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Are you CIF certified? Yes No

If yes, list sports: \_\_\_\_\_

Are you SCMAF certified? Yes No

If yes, list sports: \_\_\_\_\_

Have you had any formal training? (Clinics, member of an official's association, etc.) Yes No

If yes: Training Name: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Training Name: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Do you have any children and/or relatives that participate in our sports programs? Yes No

If yes, Name: \_\_\_\_\_ Sport: \_\_\_\_\_

Name: \_\_\_\_\_ Sport: \_\_\_\_\_

Do you have any medical conditions that may affect your ability to officiate?    Yes                      No  
If Yes, please explain (this does not necessarily disqualify you for an officiating assignment): \_\_\_\_\_

Have you ever been refused participation in any other youth sports programs?    Yes                      No  
If Yes, please explain: \_\_\_\_\_

Why do you want to be a youth or adult sports official? \_\_\_\_\_

Why are you qualified to officiate? \_\_\_\_\_

Are you currently on a team (sports, debate, etc.) that has a set game/event schedule?                      Yes                      No  
If Yes (we will need a copy of the schedule) please list:  
Organization/School: \_\_\_\_\_ Team Name/Level: \_\_\_\_\_ Sport: \_\_\_\_\_

Please list any dates that you are unavailable to work: \_\_\_\_\_

### IMAGE RELEASE

Check here if minor.

I consent and hereby grant to the Town of Yucca Valley, its Officers, Agents, Employees and Assigns the right to take photographs of me in connection with my role as an official. I understand that this photograph and/or other digital reproduction may be utilized for all publication processes, whether electronic, print, digital or electronic publishing via the internet. I understand that I will not receive payment from any party.

By signing this form, I confirm that this consent form has been explained to me in terms which I understand.

\_\_\_\_\_  
Participant or Parent / Guardian's Name

\_\_\_\_\_  
Participant or Parent / Guardian's Signature:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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### CODE OF ETHICS

As an official for the Town of Yucca Valley youth sports programs, I promise to set a good example at all times. I will demonstrate and promote good sportsmanship in every aspect of the sport, use appropriate language at all times, and will encourage positive attitudes by using constructive criticism.

I will consider the safety of all participants to be the top priority of the program, followed by good sportsmanship and fair play. I will remember that the program is designed for children and not adults, as a fun, rewarding, and educational experience, with emphasis placed on absorbing the fundamentals of the particular sport, not on winning at all costs.

I hereby pledge to provide positive support, care, and encouragement to the participants by following the Town of Yucca Valley's Official's Code of Ethics outlined in the Town of Yucca Valley's Youth Sports Handbook.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_