

MERRIMACK
VALLEY
UMPIRES



Merrimack Valley Umpires Association

Application for Membership

NAME:	ADDRESS:	
CITY:	STATE:	ZIP CODE:
HOME PHONE:	CELL PHONE:	
YOUR OCCUPATION:	DATE OF BIRTH:	
E-MAIL		
LIST MEMBERSHIPS OF ANY OTHER UMPIRING, REFEREEING ORGANIZATIONS		
ORGANIZATION NAME:		
ARE YOU IN GOOD STANDING: YES <input type="radio"/> NO <input type="radio"/> IF 'NO' PLEASE EXPLAIN (use other side, If needed)		
SPORT:	HOW LONG WERE YOU A MEMBER:	
YEARS OF AFFILIATION (ex: 1980-2010)	WHAT LEVEL GAMES DID YOU WORK:	
ADDRESS:	CITY/State:	

PLEASE RETURN
COMPLETED

APPLICATION TO:

MVUA, 440 MIDDLESEX RD
#104, TYNGSBORO, MA 01879

OR ATTACH
AND EMAIL

TO

EEJJ@COMCAST.NET

I hereby declare that the above information is true, accurate, and complete. I am aware that any false or misleading statements or omissions I agree that as a condition of being associated with the Merrimack Valley Umpires Association, a criminal records check of my background me I agree that I will hold harmless, defend, and indemnify MVUA its officers, directors, employees, and agents from any and all third party claims,

Signed:

Date:

To be completed by the MVUA Secretary)/Treasurer

Clinic fee paid by: Check <input type="checkbox"/> Cash <input type="checkbox"/>	Check No: _____	Test Score: _____
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