



"PLAY THE BEST,
PLAY ASA SOFTBALL"
*New Hampshire, Where Softball
is a Fun Game*



NEW HAMPSHIRE AMATEUR SOFTBALL ASSOCIATION
UMPIRE REGISTRATION FORM (YEAR: _____)
THE NATIONAL GOVERNING BODY OF SOFTBALL

(Please Print or Type)

Name: _____ Sex: M F Home Phone: ____/____/____ Work Phone: ____/____/____ Cell Phone: ____/____/____

Mailing Address: _____ City/Town: _____ State: _____ Zip: _____ Email: _____

New umpire? _____ How many years as an ASA umpire? _____ I work in the _____ league: Umpire in Chief of my league is: _____

I understand that I must attend at least one (1) umpire clinic each year. I will only umpire with proper equipment and uniform.

I presently umpire the following: Modified Pitch _____ Slow Pitch _____ Fast Pitch _____ Adult: Men _____ Women _____ Co-Ed _____ Youth: JO _____

I am interested in working in a state tournament in the following division of play:

Slow Pitch	Modified Pitch	JO (Junior Olympic)
Men's Class B, C _____	Men's Class B, C _____	Fast Pitch _____
Men's Class D, E _____	Men's Class D, E _____	
Women's Class C, D _____	Women's Class B, C, D or E _____	
Men's Church _____	Co-ed _____	
Co-ed _____		

UMPIRES FEE: **\$55.00** includes: Insurance, rule book, test, and clinics. A \$25.00 service charge will be in effect on any check returned from the bank.

MAKE CHECK PAYABLE TO: NH ASA (Note: First year umpires must send bank check or money order only. No personal checks.)

MAIL TO: NH ASA
PO Box 8178
Portsmouth, NH 03802

FOR STATE OFFICE USE ONLY: Check No.: _____ Amount: _____ Date: _____