

St. Louis Metro ASA Umpire National Championship Request Form

Name: _____ Medal's Program Level: _____

Number of Years Registered ASA: _____ Last ASA Umpire School: _____

(Must Have Attended Within Last 5 Years)

How Many ASA Games In St. Louis Did You Umpire This Past Season? ____ FP ____ SP

How Many 3U System Games Have You Umpired This Past Season? ____ (Can be at any level of softball)

Have You Ever Umpired An ASA National Championship? ____ Yes ____ No If so, how many? _____

If Yes, What Year Was Your Last Championship? _____ Which City/State Was It Played? _____

What "Rating" Did You Receive? ____ Excellent ____ Very Good ____ Good ____ Satisfactory Your Score? _____

(Be Accurate - Look It Up If Unsure)

What Championship Was It? ____ Territory Championship ____ A ____ B

____ USA Championship

What Division Of Play Was It? ____ Fast Pitch ____ Slow Pitch

Junior Olympic: ____ Boys ____ Girls ____ 10U ____ 12U ____ 14U ____ 16U ____ 18U ____ Gold

____ Adult: ____ Men's ____ Women's ____ Below A ____ A ____ Major ____ Other

Did You Receive An Assignment The Last Day? ____ Yes ____ No What Was It? _____

What ASA National Championship Would You Like To Umpire? _____

Where Is It Located? _____ Do You Have Family There? ____ Yes ____ No

Where Do You Umpire The Majority Of Your ASA Games In The St. Louis Metro? _____

What Nights Do You Work? ____ Mon ____ Tue ____ Wed ____ Thu ____ Fri

By completing this request form, you understand and agree to the requirements of the St. Louis Metro ASA Umpire Association as set forth by its ASA National Championship Policy. Completion of the form DOES NOT GUARENTEE your assignment to the requested championship.

This form must be completed AND received by YOUR District UIC by the end of January!

Umpire's Signature: _____ Date: _____

Approved By District UIC: _____ Date Received: _____

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\_\_\_\_ Approved \_\_\_\_ Postponed \_\_\_\_ Declined UIC Signature: \_\_\_\_\_

Reason: \_\_\_\_\_