Please Cut Along Dotted Line

| 2022 22 WIA A CDO | ORT OFFICIAL LICENSE APPLICAT | CION Check sports in which you | wish to be licensed |
|--|---|--|--|
| | | | |
| Occupation Occupation | THLETIC ASSOCIATION, 5516 Vern Holmes Dr., Stevens Point, WI 5- Male Pemale Date of Birth | 1102-0033 | |
| Occupation | Officials Association No. | FOOTBALL \$15 | |
| TELEBRIONE NO. 4 1 1 1 | | GVMNASTICS \$15 | |
| TELEPHONE NO's (Include Area Code) These numbers will be published in the on-line Officials Directory unless otherwise noted. | | HOCKEY \$15 | 00 |
| HOME | CELL | SOCCER \$15 | 00 |
| EMAIL ADDRESS (Required) _ | · · · · · · · · · · · · · · · · · · · | SOFTBALL \$15 | 00 |
| ☐ Click box if you do not want your contact information shared with rSchoolToday, our preferred partner for officials assignments and directory features utilized by member schools. Note: Selecting this option may result in diminished number of assignments. | | SWIMMING & DIVING \$15 | 00 |
| | | * II TD A C V % EIEI D 915 | 00 |
| | | Do you also officiate cross of | |
| Have you ever been charged with | a felony or any type of assault? Yes No | VOLLEYBALL \$15 | _ |
| APPLICANTS – Please print NAME, MAILING ADDRESS, and ZIP CODE below. | | WRESTLING \$15 | 00 |
| | | BASIC LICENSE FEE † | NO FEE |
| | | (All fees waived for high school | |
| | | SPORTS FEE(S) from above | \$ NO FEES |
| | | Late Fee* (\$30) | \$ NO FEES |
| | | TOTAL ENCLOSED | \$ NO FEES |
| \dagger Note: If you will be a high school student for the 2022-23 school year, you do not need to pay any fees. | | * Required only if you were licens reapply by the July 31, 2022 dead | ed in 2021-22 and you did no ine. |
| | Fold on Line | | |
| I desire to be licensed as athletics in the member sc ethnic bias. I clearly unde member schools. By subm | FORE SIGNING: If an accurate and working knowledge of the rules and an official. I will uphold all WIAA's policies, includenous of Wisconsin and conducting them in an atmosperstand that: I am acting as an independent contractiting this application, I agree to review the WIAA Conditions stated in this Guide. | uding those of promoting who esphere of sportsmanship, free etor and not as an employee of | lesome amateur from gender and the WIAA or its |
| Please Sign Applicants Signature | X | | |
| Н | igh school students i | must have | _ |
| this ca | rd signed by their at | hletic direct | or. |
| SIGNATURE of Athletic Director | Name of Scho | ool | |
| | | | |

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Please return completed form along with payment:

WIAA 5516 Vern Holmes Dr. Stevens Point, WI 54482