

**GEORGIA HIGH SCHOOL ASSOCIATION**

*P. O. Box 271, Thomaston, GA 30286*

**APPLICATION FOR REGISTRATION FOR OFFICIATING**

*To be accompanied by registration fee and submitted to the GHSA by Association Secretary*

**Print or Type**

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(First, Middle, Last)

Mailing Address \_\_\_\_\_  
(Street or P. O. Box) (City) (Zip Code)

Business Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Age \_\_\_\_\_

Education: (circle one) High School Graduate GED College Graduate

Occupation \_\_\_\_\_

Have you ever been convicted of a crime other than a traffic violation? Yes No

If "Yes", give full particulars including the offense, date, and place of conviction. \_\_\_\_\_

**OFFICIATING EXPERIENCE**

Sport of Registration \_\_\_\_\_

Number of years officiating above sport: \_\_\_\_\_ High School \_\_\_\_\_ College \_\_\_\_\_

Do you have prior officiating experience with the GHSA? Yes No

If "Yes", what sport? \_\_\_\_\_ What association? \_\_\_\_\_ What year? \_\_\_\_\_

Do you have prior officiating experience in another state? Yes No

If "Yes", what state? \_\_\_\_\_ What sport(s) \_\_\_\_\_ How long? \_\_\_\_\_

(Note: It is the responsibility of the official to contact the former state high school association to have records sent to the GHSA. Records needed per sport are: years experience, last year's clinic attendance, games worked, exam scores, and current rating.)

**REFERENCES**

Give names and addresses of three individuals who know your character and ability as an official.

| Name  | Address | Position |
|-------|---------|----------|
| _____ | _____   | _____    |
| _____ | _____   | _____    |
| _____ | _____   | _____    |

I enclose fee of \$28.00 for registration as an official in the sport indicated.

I hereby certify that I have an accurate working knowledge of the rules of the sport in which I desire registration.

I am in hearty accord with the policy of the Georgia High School Association to promote clean and wholesome amateur sports in the high schools of Georgia and I will cooperate with the officers of the Association at all times to this end. In requesting this application, I hereby agree to abide by and support the policies of the Georgia High School Association.

I agree to attend clinics and/or Rules Interpretation meetings according to the policy set by the Georgia High School Association.

Signature \_\_\_\_\_