

GOPHER STATE OFFICIALS ASSOCIATION

MEMBERSHIP APPLICATION FORM

NAME	_____	DATE	_____
ADDRESS	_____	HOME PHONE	_____
	_____	WORK PHONE	_____
		CELL PHONE	_____
SPORTS INTERESTED IN OFFICIATING: (Circle)		AGE	_____
SOFTBALL	BASEBALL	BASKETBALL	FOOTBALL

WHAT HIGH SCHOOL DID YOU ATTEND? _____

PLEASE LIST ANY HIGH SCHOOL/COLLEGIATE PLAYING EXPERIENCE IN THE SPORT(S) CIRCLED ABOVE.

PLEASE LIST ANY OFFICIATING EXPERIENCE. INCLUDE SPORT, # OF YEARS, LEVEL OF GAMES, CONTACT INFO.

PLEASE LIST ANY CURRENT GOPHER OFFICIALS THAT WE CAN CONTACT FOR REFERENCE.

PLEASE LIST ANY OTHER INFORMATION THAT YOU FEEL WOULD BE USEFUL FOR GOPHER OFFICIALS TO REVIEW YOUR REQUEST FOR MEMBERSHIP.

**RETURN TO BOZO WINCEK, 6307 61ST AVENUE NORTH
CRYSTAL, MN 55428**