|  |  |  |
| --- | --- | --- |
| **OPTIMIST CLUB OF MIAMI LAKES** |  |  |
| **UMPIRE REGISTRATION** |  |  |
|  |  |  |  |  |  |  |  |  |
| **Please check below, the leagues you have prior umpire experience with. If this is your first-time umpiring, please state so.** |  |
| \_\_\_\_\_\_\_\_ |  | 6U TEE BALL DIVISION |  |  |
| \_\_\_\_\_\_\_\_ |  | 8U DIVISION |  |  |
| \_\_\_\_\_\_\_\_ |  | 10U DIVISION |  |  |
| \_\_\_\_\_\_\_\_ |  | 12U DIVISION |  |  |
| \_\_\_\_\_\_\_\_ |  | 14U DIVISION  |  |  |
| \_\_\_\_\_\_\_\_ |  | 10U – 16U SOFTBALLFIRST TIME UMPIRING |  |  |
|  |  |  |  |  |  |  |  |  |
| **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  |  |  |
| **Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |
|  |  |  |  |  |
| **Emergency Contact (required if under 18) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |

Please list the days you are available to work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Umpires are paid per game. Due to the schedule of our volunteers, payments will be made Saturday afternoons at the park.

I understand that by signing up to umpire in the Optimist Club of Miami Lakes Baseball/Softball program that I am responsible for attending the clinics and training provided, the knowledge of the rules of baseball/softball plus any additional league rules, and; that I am required to purchase and wear a uniform and represent the Optimist Club of Miami Lakes in the promotion of Good Sportsmanship and responsible behavior; by conducting myself in a professional manner, before, during and after all sporting events, while maintaining control of all game situations, and that I will report any unsportsmanlike conduct or inappropriate behavior promptly to league officials.

I also understand that I may be required to belong to an umpire’s association that I will be responsible for my membership and any requirements of membership. Additionally, I will submit to a background check as required by the Town of Miami Lakes

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**  **Date**