

# District 4 Registration Form

Name \_\_\_\_\_ Go By \_\_\_\_\_

Cell \_\_\_\_\_ Home \_\_\_\_\_ work \_\_\_\_\_

Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

High School \_\_\_\_\_ Last YR attended \_\_\_\_\_

Year started in MHSAA \_\_\_\_\_ Number of years as football official \_\_\_\_\_

Employer \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How long \_\_\_\_\_

Previous Employer \_\_\_\_\_

Schools I do not need to officiate:

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

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_