

**NATIONAL
CHAMPIONSHIP UMPIRE
AGREEMENT**



USA SOFTBALL
2801 N.E. 50th Street
Oklahoma City, OK 73111-7203
(405) 424-5266 • Fax (405) 424-3855
<http://www.usasoftball.com>

**ATTACH
PASSPORT
PHOTO
HERE**

Note: Please complete this form in full. Ensure that you sign the form. Keep one copy for your records and email or mail to your Local Association UIC. They or the RUIC will then forward copies to the following: National Championship UIC (copy with photo), National Championship Umpire Coordinator, and USA Softball National Office. **THIS FORM MUST BE RETURNED WHETHER ACCEPTING THIS ASSIGNMENT OR NOT.** Fill in, type or neatly print. **Complete this box whether accepting or declining.**

PERSONAL INFORMATION

Name _____
Street _____
City _____ State _____ Zip _____
Telephone – Preferred _____
Telephone – Emergency Contact (____) _____
E-Mail _____

Accept **Decline**

IF YOU ACCEPT THIS ASSIGNMENT, YOU MUST COMPLETE THE REMAINING SECTIONS OF THIS AGREEMENT.

Championship Assigned _____
Dates _____
Location _____
Association Commissioner _____
State/Metro Association _____
Region Number _____
Assignment Category
Host <input type="checkbox"/> Host Exchange <input type="checkbox"/>
At Large <input type="checkbox"/>

TRAVEL INFORMATION (If by air, contact Journey House Travel at (800) 726-0051 after June 1 for arrangements)

I will be arriving by: Plane Car Local Umpire Needs Room Date _____

If you do not use Journey House Travel Service for airline travel, you will be responsible for your ticket. If traveling by car, a travel voucher and email verifying flight cost must be submitted to your UIC of the assigned championship to be reimbursed. Reimbursement for car travel shall not exceed air travel fare. Submit your flight information to the championship umpire coordinator as soon as they are made.

HOUSING INFORMATION (The local umpire coordinator will make reservations for you based on the information below)

Smoker Non-Smoker Age _____ Gender _____

I will arrive alone with family If bringing family, please list the number of rooms required: _____

Note: If my family accompanies me, I understand I am responsible for their housing. This information assists in assigning rooms while attending the championship. If you mark alone and change your mind you must have coordinator approval based on room availability.

PAST UMPIRE EXPERIENCE (Indicate the number of USA Softball tournaments/championships)

	Adult SP	Adult FP	Youth SP	Youth FP	Modified	16-Inch
National Championships	_____	_____	_____	_____	_____	_____
Total games umpired last year	_____	_____	_____	_____	_____	_____
Years as a USA Softball Umpire	_____	_____	_____	_____	_____	_____
Year of last Umpire School attended: Nat'l _____ Advanced _____ Regional _____ Association _____	For info only, not required					

REMARKS _____

Contract Digitally Provided, Signature on File with local association.

I have accepted the USA Softball National Championship assignment as indicated above and agree that all information on this form is correct. I can be contacted at any time at the address or phone number listed. I also agree to attend the pre-championship clinic as indicated on the information form and will be available the entire championship for any and all assignments. Should I cancel after accepting this assignment, not return this form, or not show at the championship, I understand that no national championship assignments will be available for two to five years.

Umpire's Signature _____ Date _____

Revised: 02-13-2023

