

Central U.P. Youth Football League, Inc

P.O. Box 142

Iron Mountain, Mi 49801

Officials Application Form

Name _____

Home Phone ____-____-____

Mailing Address _____

Work Phone ____-____-____

City _____ State ____ Zip ____

Email _____

Driver License Number _____

Cell Phone ____-____-____

Social Security Number _____

(Will be kept in a confidential file, but is necessary for background checks)

Occupation _____

Position Applying for (Referee or Official) _____

Area (Required) Bark River Crystal Falls Florence Iron Mountain Kingsford
(Circle one)
 North Dickinson North Central North Dickinson Norway West Iron Cty.

Occupation _____

Previous Refereeing Experience:

Position	Sport	Year(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Background Declaration

I have not been convicted of any charge related to or having involved children.

I here by authorize the Central U.P. Youth Football League to conduct a background check. I understand that this check will only be a confirmation of my declaration made above and no other information will be sought by the League.

Printed Name _____

Signature _____

Date ____-____-____