

BOARD 41 REFEREE SCHOOL APPLICATION

APPLICANT INFORMATION

Name:		
Date of birth:	Home Phone:	Cell Phone:
Current address:		
City:	State:	ZIP Code:
Email Address:	Business Phone:	

EMERGENCY CONTACT

Name:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		

FEE INFORMATION

Date of Check:	Check #	Amount:
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PLEASE READ CAREFULLY

I certify that I meet the requirements set forth by the International Association of Approved Basketball Officials (IAABO) in that:
I am a person of good character, over eighteen (18) years of age, who resides within the confines of Nassau County, N.Y.

SIGNATURE

I authorize the verification of the information provided on this form as to my residence.

Signature of applicant:	Date:
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PROOF OF NASSAU COUNTY RESIDENCE

Type:	Date Submitted:
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FOR OFFICE USE ONLY

September	Yes	No	September	Yes	No	September 30th	Yes	No
October 7th	Yes	No	October 14th	Yes	No	October 21st	Yes	No
October 28th	Yes	No				Written Test	PASS	FAIL
Mechanics Class 1	Yes	No	Mechanics Class 2	Yes	No	Floor Test	PASS	FAIL
Top 100 Day 1	Yes	No	Top 100 Day 2	Yes	No	Date Admitted to Board:		
Signature of Interpreter or Co-Interpreter:							Date:	

NOTES:

MAIL COMPLETED FORM WITH CHECK FOR \$250 MADE OUT TO "Long Island District Board # 41"

To:

**Mr. James Graham
35 Mole Place
Amityville, N.Y. 11701**

FEE FOR WALK INS TAKING THE WRITTEN EXAM IS \$175.00 (CASH ONLY) WALK-IN FLOOR EXAMS \$75.00

Note: The class will be limited to the first 40 who apply and whose checks are cashed.