

WEST COAST OFFICIALS ASSOCIATION, INC.

P.O. BOX 20514 * TAMPA, FLORIDA 33622

NAME _____ RENEWAL ___ NEW ___

STREET ADDRESS _____ CITY _____

ZIP CODE _____ HOME PHONE _____ WORKPHONE _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____ C-PHONE _____

EMAIL ADDRESS _____

RACE (FHSAA Required) _____ GENDER (FHSAA Required) _____

PRIMARY ASSN _____ SECONDARY ASSN _____

Register in:

Years experience

MEMBERSHIP DUES

Football _____

Basketball _____

Flag Football _____

New members - \$ 30.00 each sport
Football - \$ 50.00; Basketball - \$ 45.00
Football/Basketball - \$ 80.00
Football/Flag Football - \$75.00
Basketball/Flag Football - \$70.00
Football/Basketball/Flag Football - \$100.00
Flag Football - \$30.00
ECO - \$30.00

Registration Fees

FINES

Football

\$10.00 TO DECLINE ARBITER ASSIGNMENT

Basketball

ANY SCRATCHES WITHIN 24 HOURS - GAME FEE

Flag Football

Football ECO

NO SHOWS - GAME FEE or FEES and SUSPENSION UNTIL
SCHEDULE MEETING WITH SPORTS COMMITTEE

Basketball ECO

Fee _____ Fine _____ Total Paid _____ Date Paid _____

TREASURER'S SIGNATURE _____

I will notify the assignment officer of any changes in my availability prior to assignments being distributed.
I agree to the deduction of all fines to be deducted from game fees subject to being reviewed by the
Sports Committee. I will read and abide by the By-Laws of this Association.

SIGNATURE _____ DATE _____