

PENNSYLVANIA AMERICAN LEGION BASEBALL

UMPIRE NOMINATION FORM

Region _____ of the Pennsylvania American Legion Baseball program wishes to nominate the following Umpire for consideration at a State Championship Tournament. The individual nominated represents the best umpire involved in the American Legion Baseball within this Region. I fully understand that the final selection of umpires is the responsibility of the Activities Director. **NOTE:** Individual must be nominated each year.

FULL NAME: _____
(Last) (First) (Initial) (Nickname)

MAILING ADDRESS: _____
(Street, City, State and Zip)

TELEPHONE: _____ (H) _____ (O)

DATE OF BIRTH: _____ WEIGHT: _____ HEIGHT: _____

OCCUPATION:

EDUCATIONAL BACKGROUND:

MILITARY BACKGROUND: (Unit, Year)

QUALIFYING EXPERIENCES:

PREVIOUS TOURNAMENT ASSIGNMENTS:

AMERICAN LEGION MEMBER: YES: _____ NO: _____ CARD NO. _____

REGIONAL DIRECTOR