

# NEW HAVEN FOOTBALL OFFICIALS ASSOCIATION – NHFOA APPLICATION FOR MEMBERSHIP

## APPLICANT INFORMATION

Name:

Mailing Address:

City:

State:

ZIP Code:

E-Mail Address:

Home Phone:

Work Phone:

Date of birth:

Cell Phone:

## EMERGENCY CONTACT INFORMATION

Name:

Address:

Home Phone:

City:

State/Zip:

Cell Phone:

Relationship:

Work Phone:

## OFFICIATING EXPERIENCE\*

# of Years Officiating Football:

Contact Name and Phone:

Location / Board:

Other Sport Officiated:

# of Years:

Contact Name and Phone:

Location / Board:

Other Sport Officiated:

# of Years:

Contact Name and Phone:

Location / Board:

Other Sport Officiated:

# of Years:

Contact Name and Phone:

Location / Board:

**\*EXPERIENCE NOT REQUIRED FOR MEMBERSHIP**

## NHFOA/REFERENCES – DO YOU KNOW ANY CURRENT OFFICIALS IN THE NHFOA?

Name:

Name:

Name:

## SIGNATURES

A non-refundable application fee is required and must accompany the application.

**Please make your check payable to the "NHFOA" for \$90.00.** The application fee covers:

1. The applicant's first year association dues for the NHFOA
2. The applicant's first year association dues for the CIAC Officials Association (Connecticut)
3. National Federation Rules Book, Case Book and Mechanics Book
4. Summer on-field clinics and classroom sessions
5. Background check

By signing below, I certify that the above information is accurate and I understand that the application fee is non-refundable.

Signature of applicant:

Date:

**Return completed application and fee to:**

NHFOA Treasurer  
22 Beach Shore DR  
Milford, CT 06460