

**2012 WOMENS LACROSSE UMPIRE TRAINING CLASS APPLICATION**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**EMAIL :** (please print clearly) \_\_\_\_\_

**PHONE:** (reliable contact number) \_\_\_\_\_

**CURRENT HIGH SCHOOL STUDENT?** \_\_\_\_\_ **GRADE:** \_\_\_\_\_ **If so, what school do you attend?** \_\_\_\_\_

**UMPIRE EXPERIENCE:** \_\_\_\_\_

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**Are you currently a member of USL? If so please print your USL number:** \_\_\_\_\_

**Please remit application with check or money order for \$100.00 payable to:**  
**Central Jersey 3**

**Mailed to:**

**Libby Hicks  
27 Abey Drive  
Pennington, NJ 08534**

**Application and check must be received by January 24, 2012**