



## 2019 JACKSON SPRING BASEBALL LEAGUE UMPIRE APPLICATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City / Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent information if under 17 years old:

Name of Parent: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Do you have prior umpire experience? Y    N    If so, please indicate no. of years and at what level

Are you a licensed/certified umpire Y    N    \_\_\_\_\_

What date are you available to start? \_\_\_\_\_ Do you have a full time/part time job Y    N

If so, what are your typical working hours?

Do you have any medical conditions which may restrict your ability to bend, move or otherwise perform your job as an umpire Y    N    If yes, please explain: \_\_\_\_\_

Most games will begin 5:30 PM week nights (M-F) and weekend games on Sat. mornings through early afternoon. **Umpires are expected to be at each game site at least 20 minutes prior to game time.**

Do you have any availability restrictions on the days and times listed above?    Y    N

If so, explain: \_\_\_\_\_

Umpires will be employed by the City of Jackson as part time, and will need to complete employment paperwork (W-4, I-9, etc.) and provide a bank account/routing # for direct deposit.

Umpires attest that the information contained in this application is true and correct. Any falsifying of information may result in immediate termination.

Umpire Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail to: CITY OF JACKSON  
BASEBALL-UMPIRE  
Attn: SWA  
101 COURT STREET  
JACKSON, MO 63755**

**Drop off: Civic Center    Phone: 573-204-8848  
381 E. Deerwood Dr.  
Open: Mon – Thurs 7 AM – 9 PM  
Fri 7 AM – 8 PM  
Sat 9 AM – 6 PM  
Sun 12 – 6 PM**