



Membership Application



Each applicant must complete a *SEPARATE* application for each sport

HAVE YOU EVER BEEN A MEMBER OF ANY TASO/SOA DIVISION YES NO

CHECK THE ONE SPORT THIS APPLICATION IS FOR:

- BASEBALL
 BASKETBALL
 FOOTBALL
 SOCCER
 SOFTBALL
 VOLLEYBALL
 FB AUXILIARY
 SOC AUXILIARY

PLEASE PRINT CLEARLY – ALL FIELDS REQUIRED

FIRST NAME												MIDDLE NAME											
LAST NAME												DATE OF BIRTH (MM DD YYYY)											
TASO ID #				SOCIAL SECURITY NUMBER				HOME PHONE NUMBER															
WORK PHONE				EXT				CELL PHONE															
MAILING ADDRESS																							
CITY												STATE				ZIP							
PREFERRED E-MAIL ADDRESS																							
CHAPTER NAME												CHAPTER CODE											

PLEASE READ CAREFULLY: *I understand and agree that:*

<ol style="list-style-type: none"> In accepting game assignments from the Chapter, I am acting as an independent contractor. I understand that I am protected by a Liability and Accident policy while a member in good standing of TASO. Coverage applies while conducting officiating activities and both subject to policy limitations and a deductible on the accident policy. The TASO website should be referred to for coverages and other conditions. I will comply with all TASO and Chapter Policies and Procedures and understand that TASO at their discretion may conduct background checks. 	<ol style="list-style-type: none"> <i>Except as listed on the attached sheet or as previously disclosed and ruled on by the Disciplinary Appeals Committee, I certify that, except for minor traffic offenses punishable by fine only, I have not (1) been convicted of a state or federal misdemeanor or felony offense, (2) been arrested on a pending state or federal misdemeanor or felony charge, or (3) received deferred adjudication or other deferred sentencing for a state or federal misdemeanor or felony offense. Contradictions with (1), (2) or (3) above are NOT automatic grounds for denial of membership. Please submit details with application for Disciplinary Appeals Committee review.</i>
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I certify that this information is true and correct and understand that TASO may verify all or any portion of this application, including nationwide background criminal searches.

Applicant Signature _____ Date _____

NEW members to this sport: To **APPLY** for TASO membership, submit this form with **ALL** information completed, along with \$35 state dues, and local chapter dues, to your local chapter secretary.

I have confirmed the identity of this applicant by visually verifying a government issued photo identification card.

Chapter Officer Signature _____ Date _____