

PONY Baseball/Softball — UMPIRE REGISTRY

____ New ____ Renewal

Name _____

Address _____
Street City State Zip Code

Telephone (_____) _____ (_____) _____
Home Include Area Code Business Include Area Code

THIS PORTION MUST BE SIGNED BY A LEAGUE OFFICER OR PONY FIELD DIRECTOR

who is familiar with your competency as an umpire and who will hereby certify that you are familiar with rules and regulations governing play in PONY Baseball and/or PONY Softball leagues. Competency Certification: I hereby certify that the person named hereon is familiar with the rules and regulations of **PONY Baseball, Inc.** and is qualified to umpire *(Please check all that apply.)*

PONY Baseball ____ **PONY Softball** ____ **Fast Pitch** ____ **Slow Pitch** games.

Signed: _____ Title: _____

Please enroll me in Pony's Umpire Insurance Program
(Enclosed is the additional \$20.00 fee – \$35.00 total)

Beneficiary _____

Are you of legal age in the state in which you reside? ____ Yes ____ No

If you are currently a member of an Umpiring Association, please give name of association.

OFFICE USE

REC'D ____

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SENT

When completed, this form is to be mailed with appropriate fee to:

PONY Baseball/Softball, Inc.
P.O. Box 225, Washington, PA 15301

Renewal applications will be forwarded annually in November to all Registered Umpires.

10/98