SCUA

South Central Umpire Association

June. 2019 – June. 2020
Umpire Registration Association and Agreement Form

Complete Umpire Registration and Agreement Form and Email to: mikefagan@gretcheninsure.com Send Annual Dues \$100.00 (Check, Money Order, Pay Pal): **SCUA** 407 E. Main Street **Tomball, Texas 77375** First Name:_____ Last Name:____ Address:_____ Date of Birth: (M/D/Y) ____/___ Cell Phone: _____ Work: _____ Email: Umpire Experience: New Umpire___HS__JUCO__DIV II & III___DIV I___ **SCUA Umpire Agreement:** By submitting this umpire Agreement Form, I acknowledge and agree that I release and hold SCUA harmless from any and all claims arising out of any of the activities connected with SCUA and associated umpiring activities. I understand I am eligible to officiate at the appropriate level of competition indicated by my experience and rating, and fully understand there are no assurances of the number, type or location of games assignments. I accept umpire compensation and reimbursement rates established by SCUA. I acknowledge my obligation for payment of fees established by SCUA. I understand that my registration and association with SCUA does not create an employment contract or an employment relationship with the SCUA. I will act and be considered an independent contractor while serving as a SCUA Umpire and will be responsible from my insurance expenses. As a SCUA Umpire, I will conduct myself in a professional manner that demonstrates total impartiality, courtesy and fairness to all parties. I certify that all information provided by me in this for is true, accurate and complete. Signed______Date___/____