

**The Southern Independent Conference  
Officials Alliance Inc. – SICOA**

www.sicoaofficials.com

*If You Are A Returning Official:*

2009 Crew Chief: \_\_\_\_\_

Your Assigned Uniform Number: \_\_\_\_\_

*Check Box That Is Applicable*

- Returning Official
- New Applicant
- Transfer Official
- Observer / Evaluator Only
- Clock Operator Only

**2010**

**MINOR LEAGUE FOOTBALL OFFICIALS REGISTRATION FORM**

**STOP: BEGIN HERE – COMPLETE STEPS 1-4 USING ONLY A BALLPOINT PEN AND CAPITAL LETTERS**

**STEP 1: Biographical Information**

Last Name										First Name									

Mailing Address																			

City										Postal Code									

E-Mail Address																			

Home Phone Number										Work Phone Number									
			-										-						

Cellular Phone Number										Fax Number									
			-										-						

Date Of Birth dd/mm/yr										Social Security Number									
			-																

**STEP 2: Officiating Questionnaire**

LEVEL OF GAME	POSITION	YRS EXPERIENCE
High School JV		
High School Varsity		
Minor League		
Collegiate		
Indoor		
Collegiate Affiliation	Position	# Of Years

**STEP 3: Criminal Background Disclaimer**

The Southern Independent Conference Officials Alliance (SICOA) require all member officials to undergo a Background Check prior to the start of the minor league season. Officials that have felony convictions are not necessarily ineligible to officiate but must disclose any felony convictions for review and disposition by both SICOA, and the minor league conferences in which we service. If you answer no and it is later discovered that information is false, your registration will automatically be terminated.

**Have You Ever Been Convicted Of A Felony?**

- YES  NO

*If you fail to answer this question, your application will be automatically rejected.*

**Step 4: Information Certification**

*I understand that by successfully completing this application and registering with SICOA as a contest official, I am eligible to officiate at the appropriate level of competition indicated by my experience, but fully understand that there are no assurances of any game assignments. Further, I understand that I will and follow their rules including, but not limited to, the mandatory background check, meeting and clinic attendance and the annual NFL football rules examination. I further understand that my registration with SICOA does not create an employment contract or an employment relationship with any minor league team, league or conference program. I agree to hold SICOA and their representatives harmless for any reason and will represent the association well by following their rules, policies and procedures. I attest that all information I have provided is truthful and accurate.*

SICOA minor league officials membership runs from October 1<sup>st</sup> through May 31<sup>st</sup> with an annual non-refundable membership fee of \$40.00 and must be received with this completed application. Please make your check payable to SICOA. Application will not be accepted without fee.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date Submitted

*All officials will receive an independent contractors agreement once registration is received.*

Mail this completed application and your membership fee to:  
SICOA / Post Office Box 47651, Tampa Florida 33646