



Official's Application Form	
<i>Please print</i>	
Name	
University/College/ Military Institution	
School Mailing Address <small>(include street, city, state)</small>	
Cell Phone Number	
School E-mail Address	
Shirt Size (circle one)	<input type="checkbox"/> SMALL <input type="checkbox"/> MEDIUM <input type="checkbox"/> LARGE <input type="checkbox"/> X-LARGE <input type="checkbox"/> 2X-LARGE

OFFICIATING EXPERIENCE (NUMBER OF YEARS)	TOURNAMENT OFFICIATING EXPERIENCE (NUMBER OF TOURNAMENTS)
Recreation/Intramural _____	NIRSA/NCCS Regionals _____
Junior High/Middle School _____	NIRSA/NCCS Nationals _____
High School _____	State Tournaments _____
Junior College _____	Other: _____
College/University _____	
Other: _____	

Have you ever officiated in a 3-person mechanics system? _____ Yes _____ No

If yes, how many years? _____ years

Does your school utilize NFHS rules? _____ Yes _____ No

Official's Signature



Official's Name (please print)

***** **To be completed by Institution's Intramural Director** *****
By signing below, I verify that the above listed student meets all eligibility guidelines set forth by the State of Wisconsin Extramural Tournament.

Intramural Director Signature



Intramural Director's Name (please print)

Return this form via mail or fax by NOON on Friday, February 15, 2019 to:
 Scott Anderegg
 Marquette University
 525 N.16th Street
 PO Box 1881
 Milwaukee, WI 53201
 Fax-414-288-1588