

## 2014-2015 AOA Membership Application

Fees must accompany application. See reverse/following page for additional instructions and information.  
Name, city, phone numbers, e-mail address, sport and division will be listed on the AAA website for all registered AOA officials.

AOA Card # \_\_\_\_\_ Social Security Number \_\_\_\_\_ DOB \_\_\_\_\_  
Required for renewals Required for New Members

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Telephones: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Email Address: \_\_\_\_\_ Please check here if you would like to receive  
(Required) next year's renewal application via email.

### Circle all sports you are applying for and total fees.

Sport	New Members	Renewals	Late Renewals
Football	\$25 (deadline Oct. 1)	\$30 (Before July 1)	\$60 (July 1 – Oct. 1)
Volleyball	\$25 (deadline Oct. 1)	\$30 (Before July 1)	\$60 (July 1 – Oct. 1)
Basketball	\$25 (deadline Jan. 1)	\$30 (Before July 1)	\$60 (July 1 – Jan. 1)
Wrestling	\$25 (deadline Jan. 1)	\$30 (Before July 1)	\$60 (July 1 – Jan. 1)
Baseball	\$25 (deadline March 1)	\$30 (Before Jan. 1)	\$60 (Jan. 1 – March 1)
Softball	\$25 (deadline March 1)	\$30 (Before Jan. 1)	\$60 (Jan. 1 – March 1)
Soccer	\$25 (deadline March 1)	\$30 (Before Jan. 1)	\$60 (Jan. 1 – March 1)
Track	\$25 (deadline March 1)	\$30 (Before Jan. 1)	\$60 (Jan. 1 – March 1)

**+ \$17 NFOA\* –Must be paid once per year**

**\$ \_\_\_\_\_ Total fees**

\*Each official **must** pay an annual fee of \$17 for membership in the National Federation of Officials Association, as we are a 100% state. This includes \$1,000,000 of liability insurance and other benefits. *The AOA strongly encourages each official to purchase separate medical insurance.*

**New Members:** Any 18 year old person of good reputation, character and mental and physical health desiring to qualify as an official may present his/her application to the secretary of the AOA with the necessary fee and recommendation by a division 1 or 2 official, head coach or AAA member school administrator.

**All Applicants:** Applicants must not have been convicted of or pled guilty to a felony criminal charge. I realize I serve as an independent contractor when I agree to officiate for a school or the Arkansas Officials Association. I am obligated to fulfill all contractual agreements and work only with AOA registered officials.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Endorsed by \_\_\_\_\_ Position/School, if applicable \_\_\_\_\_

CASH

### PAYMENT OPTIONS

CHECK

CREDIT CARD

MONEY ORDER

Credit Card Payment Information			
_____ Visa	_____ MasterCard	_____ Discover	_____ American Express
Cardholder Name _____		Exp. Date ____ / ____ / ____	
Card Number _____		Amount _____	
Cardholder Signature _____			

See reverse/following page for additional instructions and information.

**INSTRUCTIONS FOR COMPLETING APPLICATION FOR MEMBERSHIP**

**Please read the instructions carefully before completing the application. Incomplete applications will be returned.**

1. Please complete all personal information on the top of the form.
2. Complete the sports section that applies to you. **If you have ever registered with the AOA in that sport you are considered a renewing member.** Circle all sports and amounts that you are applying for and enter the total fees. Since Arkansas is a 100% state, all members must pay the NFOA fee each year. This fee is only paid once, regardless of the number of sports you officiate.
3. All officials must sign and date the application below the sports section. **Unsigned applications will be returned.**
4. **New members** are required to be at least 18 years of age. This section **must be signed by the applicant, as well as endorsed** by a division 1 or 2 official or an AAA school administrator, athletic director or coach. **Unsigned applications will be returned.**
5. Upon completion of the application mail with fees to the address above.
6. **Renewing Members:** To register online go to [www.ahsaa.org](http://www.ahsaa.org). Login at the upper right hand corner of the page. Your username is your e-mail address. If we do not have an e-mail address for your, your username is [your AOA card # without the F]@aoaofficials.aoa. Your password is (all lowercase) your first initial, the first four letters of your last name, and the last four digits of your social security number.

**PACKETS WITH BOOKS, MEETING INFORMATION, ETC. WILL BE MAILED CLOSER TO THE SPORT SEASON IN WHICH YOU OFFICIATE.  
 FIRST YEAR OFFICIALS ARE NOT ELIGIBLE FOR AN AAA PASS FOR ADMITTANCE TO AAA SANCTIONED EVENTS.  
 OFFICIALS WILL NOT RECEIVE AN AAA PASS UNTIL ALL REQUIREMENTS ARE COMPLETED.**

Officials must meet minimum requirements to advance to a higher division level. If you do not meet the minimum requirements, you will be put on probation. If you do not meet requirements the following year, you will be demoted one division. You must be off of probation to be eligible for promotion. Please log in to our website at any time during the year to review your status and completion of requirements online. Your records are now on your dashboard.

Levels of classification and requirements for promotion to a higher division:

**Minimum Requirements for all Sports**

Division:	3	2	1
Minimum Age	18	NA	NA
Minimum Exam	70%	80%	90%
<b>ONLINE</b> Rules Meeting	yes	yes	yes
Spring Business Meeting	<b>every other year by district (check website for info)</b>		
State Clinic	yes	yes	every other year

**Number of Games Required by Sport to Maintain Division or be Promoted to the Next Division**  
 (in addition to completing all other requirements)

	<b>Minimum</b>	<b>Promoted to Division 2</b>	<b>Promoted to Division 1</b>
<b>Football</b>	3 SV	15 SV	18 SV
<b>Volleyball</b>	3 SV	21 SV	34 SV
<b>Basketball</b>	10 SV	39 SV	52 SV
<b>Wrestling</b>	1 SV	5 SV	10 SV
<b>Baseball</b>	6 SV	30 SV	45 SV
<b>Softball</b>	6 SV	30 SV	45 SV
<b>Soccer</b>	3 SV	24 SV	36 SV
<b>Track</b>	1SV	2SV	3SV

# Arkansas Activities Association

3920 RICHARDS ROAD  
NORTH LITTLE ROCK, AR 72117

[www.ahsaa.org](http://www.ahsaa.org)

Phone (501) 955-2500 Fax (501) 955-2600

## APPLICANT INFORMATION

*Each name is a separate charge.*

NAME: \_\_\_\_\_ Other Names \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ DL ST / #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

*NATIONWIDE CRIMINAL HISTORY-  
Database search of over 500 million  
criminal records.*

*NATIONWIDE SEX OFFENDER  
REGISTRY SEARCH- Search of National  
Database containing sex offender  
information from all 50 states.*

## RELEASE OF INFORMATION:

You are hereby notified that a consumer report or an investigative consumer report will be requested from CourtHouse Concepts, Inc., a nationwide consumer reporting agency for the purpose of evaluating you for a volunteer position, contractor or as part of a specific business application procedure. The report may contain information bearing on your character, general reputation, personal characteristics or mode of living from public or private record sources or through personal interviews with your neighbors, friends, associates, or education facility. I forever release, absolve, and indemnify to the fullest extent allowed by law, these companies, CourtHouse Concepts, Inc., Arkansas Activities Association, and all providers of information for releasing and obtaining any information arising from any and all sources.

I have read and understand the above statement and hereby give my express permission to complete this investigation.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

## Mandatory Background Check

When completing the membership application to the Arkansas Officials Association, it is required that each applicant completes and submits this release form allowing the Arkansas Activities Association to conduct a criminal background check. This is a requirement for ALL applicants whether you have been previously subjected to a background check and will be conducted every five years. Applications will not be processed without this release form. The cost for the background check is nine dollars. If you have any questions, please feel free to contact us.

## PAYMENT OPTIONS (Please make Check/Money Order payable to: Arkansas Activities Association)

- CASH
- CHECK
- CREDIT CARD
- MONEY ORDER

### Credit Card Payment Information

\_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ American Express

Cardholder Name \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Card Number \_\_\_\_\_ Amount \$9.00

Cardholder Signature \_\_\_\_\_

**In your quest for the future,  
TRUST CourtHouse Concepts to review the past...**