



Recreation Official Inquiry

Please fill out if you are interested in refereeing, officiating, score keeping, and/or umpiring. When completed please send to:
 rabreo@idahofalls.gov or
 520 Memorial Drive, Idaho Falls ID 83402

CONTACT INFORMATION

NAME (first, last): _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

BEST CONTACT #: _____

EMAIL: _____

INTERESTED IN (check all that apply) Requests are subject to availability AND approval

- BASKETBALL (YOUTH REF)
- BASKETBALL (ADULT REF)
- GYM SUPERVISOR
- VOLLEYBALL OFFICIAL
- SOFTBALL UMPIRE
- FOOTBALL OFFICIAL
- SCORE KEEPING

AVAILABILITY (check all that apply)

MONDAY **TUESDAY** **WEDNESDAY** **THURSDAY**

START TIME: _____ START TIME: _____ START TIME: _____ START TIME: _____

END TIME: _____ END TIME: _____ END TIME: _____ END TIME: _____

FRIDAY **SATURDAY**

START TIME: _____ START TIME: _____

END TIME: _____ END TIME: _____

BACKGROUND INFORMATION

18+ Years Old Y N
 Experience Officiating Y N If Yes, how many years?

FOR INTERNAL USE ONLY

RECEIVED		INITIALS: _____	DATE: _____
CONTACTED		INITIALS: _____	DATE: _____
INTERVIEWED		INITIALS: _____	DATE: _____
HIRED	Y N	INITIALS: _____	DATE: _____