

NEW HAMPSHIRE FOOTBAL OFFICIALS ASSN.
GLENN COLBURN, APPRENTICE DIRECTOR
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MEMBERSHIP APPLICATION APPRENTICE _____ / TRANSFER _____

NAME _____ BIRTH DATE _____

STREET _____

CITY _____ STATE _____ ZIP _____

PHONES (H) _____ (W) _____ (C) _____ E-MAIL _____

HEIGHT _____ WEIGHT _____ PHYSICAL LIMITATIONS _____

EMPLOYER _____ JOB TITLE _____

YEARS OF EDUCATION 1 2 3 4 5 6 7 8 9 10 11 12 / 13 14 15 16

HIGH SCHOOL ATTENDED _____

COLLEGE ATTENDED _____

COLLEGE SPORTS PLAYED _____

OFFICIATING MEMBERSHIPS _____

OFFICIATING EXPERIENCE _____

FELONY CONVICTIONS _____

REMARKS

Are you a member in Good Standing with another Federation or NCAA football official board?
If yes, attach reference letter (s).

ASSOCIATION NAME _____

ADDRESS: CITY _____ STATE _____ ZIP _____

CONTACT PERSON _____ PHONE _____

Applicant's Signature _____ Date _____