



## Missouri ASA Softball



### \*\*\* UMPIRE SERVICE AWARD \*\*\*

*Cr 11-25-13*

This Umpire Service Award has been created to honor umpires who meet certain criteria for years of service. At the 25 and 40 year levels, there is no charge for the award. At the 30 and 35 year levels, there is a \$20 fee to help cover the cost of the award. The specific umpire may complete this form, but it must be approved and substantiated by their respective district commissioner. Forms may be submitted at any time during the year. **If an umpire has already reached the 30<sup>th</sup> or 35<sup>th</sup> year as this program begins, Missouri ASA will provide the respective 30<sup>th</sup> OR 35<sup>th</sup> year award at no charge. The MASA State Office cannot provide more than 2 (free) awards per umpire and only under the conditions mentioned above.**

**ALL BLANKS MUST BE FILLED OUT COMPLETELY OR THIS FORM WILL BE RETURNED!**

Date of Submission:	
Umpire Name:	
Umpire Mailing (Street) Address:	
City, State, Zip Code:	
Phone: (Cell preferred):	
EMAIL ADDRESS (required):	
Years of Service: <small>(if there is a break in ASA registration years, list both periods of ASA registration, i.e. 1974-1988 &amp; 1991-2005)</small>	

Check here for which award you are requesting:	<b>Thank you for your service to ASA Softball!!</b>	<i>Please check the box below if you wish to receive your award at the Missouri ASA State Convention in February. You will need to purchase a banquet ticket. Check the box.</i>
	<b>25 years of ASA registration, NO CHARGE</b>	<input style="width: 50px; height: 30px;" type="checkbox"/>
	<b>30 years of service (\$20.00)</b>	
	<b>35 years of service (\$20.00)</b>	
	<b>40 years of ASA registration, NO CHARGE</b>	

Approved by District Commissioner → → →	Signature	Today's Date:	Comments:
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Comments from the district commissioner might include how your district plans to present this award to the umpire; a date by which the award is needed and/or other such information. Tell us where to send the award to: SEND TO THE UMPIRE: \_\_\_\_\_ or SEND TO DISTRICT COMMISSIONER OR UIC (Name): \_\_\_\_\_