



Association Use Only	
Cash Amount:	_____
Check No:	_____
Books Received:	_____
Received by:	_____

Date: _____

Name

Spouses Name

Mailing Address

City State Zip

Shipping Address (if different)

City State Zip

Last 4 digits of SSN

Date of Birth

Shirt Size

E-Mail

Home Phone

Work Phone

Cellular Phone

Pager

Other

Years with AFOA

Years with GHSA

Position you prefer to work

Are you on a crew?

If yes who is the referee?

Yes No

Are there any schools you should not work? _____

Are there any officials you should not work with? _____

I understand that by signing this registration form that I am an independent contractor and not an employee of the All Star Football Officials Association or Georgia High School Association or Georgia Independent Schools Association.

Signature of the above named official

Mail To:

Jon Harrell
2747 McLain Lane
Albany, GA 31707-1767

Make checks or money orders payable to All-Star Football Officials Association in the amount of \$60.00.
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