



2024 Membership Registration

**West Coast Umpires Association
3002 W. Cleveland St. Unit E-7
Tampa, Florida 33609**

Name _____ Renewal _____ New _____

Street Address _____ City _____ Zip Code _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Email Address _____

Social Security # _____ Birthday _____

Occupation _____ Place of Work (for networking purposes) _____

Are You A Veteran of The United States Armed Services? _____

Race (FHSAA Required) _____ Gender (FHSAA Required) _____

Primary Association _____ Secondary Association (If Applicable) _____

Previous State Association (if Transfer umpire) _____

Register In (✓ Applicable) with Years Experience: Baseball _____ Softball _____

Are you registered with FHSAA? Yes _____ No _____ I want to umpire: High School _____ Youth _____

Membership Dues (Check Box)

- New Members \$70
- Baseball/Softball \$70
- H.S. Softball Only \$50

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A CRIME OF MORAL TURPITUDE?

YES _____ NO _____ If yes please explain: _____

I will notify the Booking Commissioner of any changes in my availability as required. I will read and abide by the By-Laws and Policies & procedures of the Association. By my signature, I acknowledge and agree that approval of my application WILL NOT constitute an employment agreement between WCUA and myself. Rather, I will act as, and be considered an Independent Contractor while serving as an Association member and WCUA game official. I further understand that any false or misstatement of information may result in rejection or termination of application and/or membership.

Signature _____ Date _____

For official use:

Fines Decline/Accept by Passed: \$10

Turnback: \$10

Late / Uniform Violation: \$20

No Show: Game Fee and Suspension

Total Fees \$ _____

Total Paid \$ _____ Date Paid _____

Payment made by:

Cash _____ Check _____ Money Order _____

Credit/Debit/PayPal _____ Board Member _____

Treasurer's Signature _____