



DBOA ENROLLMENT APPLICATION

- SELECT ONE:** **NEW MEMBER** registration
 Annual renewal for RETURNING MEMBER
 Reinstatement for FORMER MEMBER

PLEASE PRINT CLEARLY

UIL ID Number (if known): _____ Social Security Number: _____ - _____ - _____

Date of Birth: _____ E-mail: _____

Primary Chapter: DBOA Other (please list): _____

Secondary Chapter: DBOA Other (please list): _____

Name: _____

Mailing Address: _____

City: _____ State: TX Zip Code: _____

Home Number: (_____) _____ Cell Provider: _____

Work Number: (_____) _____ Work Number: (_____) _____

I understand and agree that: 1. Membership in the Chapter does not guarantee game assignments. 2. I am responsible for informing the Chapter Secretary of any changes to my contact information as well as any change to my officiating availability and restrictions. 3. I will pay any applicable fee for canceling a game once I have accepted the game assignment. 4. The Chapter does not provide medical insurance coverage for injuries sustained or arising from my officiating assignments. If I desire such coverage, I must obtain coverage on my own. 5. In accepting game assignments from the Chapter, I am acting as an independent contractor. 6. I will comply with the DBOA Code of Ethics, Conflict of Interest, and Game Assignment policies. 7. All game assignments received through the Chapter are subject to revocation, cancellation or reassignment in the event I cease to be a member in good standing, or if it is in the best interest of the Chapter that the game be revoked, cancelled or reassigned. 8. I will file all required game reports as required by the Chapter and pay any applicable game fees, fines or assessments. 9. Except as listed on the attached sheet or as previously disclosed and ruled on by the Disciplinary Appeals Committee, I certify that, except for minor traffic offenses punishable by fine only, I have not (a) been convicted of a state or federal misdemeanor or felony offense, (b) been arrested on a pending state or federal misdemeanor or felony charge, or (c) received deferred adjudication or other deferred sentencing for a state or federal misdemeanor or felony offense. 10. I certify that this information is true and correct and I understand that DBOA may verify all or any portion of this report.

Signature

Date

New Members:	To <u>activate</u> your membership, submit this form with ALL information completed, physical examination form, and \$85 dues.
Returning Members:	To <u>renew</u> your membership prior to March 1, submit this form with ALL information completed, points form, and \$110 dues. If you are returning from last season and it is now after March 1, you must include applicable late fees (\$35).
Former Members:	To <u>reinstate</u> your membership, submit this form with ALL information completed, points form, and \$145 dues.

Send application and check made payable to DBOA to:

DBOA
P. O. Box 550156
Dallas, TX 75355