

LIBERTY BELL FOOTBALL OFFICIALS CLINIC ENROLLMENT FORM

Enrollment by April 1, 2018 guarantees your placement in the 2018 mentoring and training program.

Date: Saturday, May 12, 2018

Location: Radisson Hotel Philadelphia Northeast
2400 Old Lincoln Highway
Trevose, PA 19053

Have you previously attended the Liberty Bell Football Officials Clinic? _____

If yes, when did you last attend? _____

Personal Information

Please highlight what, if any, information given below is a change from your previously submitted registration.

Name _____

E-mail Address _____

Address _____ City _____ State _____ Zip _____

Preferred Phone _____

Shirt Size [Circle One] S M L XL XXL

Experience

Indicate Number of years at <i>varsity</i> level

Years Sandlot _____ H.S. _____ DII/DIII _____ D1 FCS _____ D1 FBS _____

Conference Affiliations _____

Preferred Position [Circle One]: R C U HL LJ FJ SJ BJ Obs/TA/ECO REPLAY

Mentor Program*

Interest in Mentor Program [Circle One] Yes No

Do you have a previously assigned Mentor? Yes No

If yes, name of the Mentor: _____

Would you like to keep the same Mentor? Yes No

*Mentoring & Training Program scrimmages may be filmed and film may be used at the clinic.

Checks and money orders should be made payable to Liberty Bell Football Officials Clinic and mailed to the following address along with this form:

Liberty Bell Football Officials Clinic
c/o Gerald Evans
1620 Melrose Avenue
Elkins Park, PA 19027-3158