

LIBERTY BELL FOOTBALL OFFICIALS CLINIC ENROLLMENT FORM

Enrollment by April 1, 2019 guarantees your placement in the 2019 mentoring and training program.

Date: Saturday, May 11, 2019

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 for \$245 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