# Armorel School District
# High School
# Request Form for Softball Umpire Pay

**Officials Name (Please Print): _____**

**Address:**_____
**PO Box/Street** **City** **State** **Zip Code**

**Phone Number** _____

**Preferred Method of payment delivery (circle one):**

**PICK UP AT CENTRAL OFFICE** (We will call to let you know when available) **MAIL**

**Social Security #_____-_____-____** (This is only needed the first time you officiate; you will not be paid if your SS# is not provided)

**Game Date: _____ Visiting Schools Name: _____**

| Game Type | Amount to be Paid | Subtotals | Total to be paid |
|---|---|---|---|
| Varsity | 75.00 | | |
| Varsity (7) and Junior Varsity (3) | 105.00 | | |
| Double Header (5 innings) | 125.00 | | |
| Double Header (7 Innings) | 135.00 | | |

**Umpire Signature: _____Date: _____**

**Approved by: _____Date: _____**
**Charles Brown, Athletic Director**

**Approved by: _____ Date: _____**
**Teresa Lawrence, High School Principal**