

NSSA REFEREE APPLICATION



Shoot Year _____

All Referee Credentials expire December 31st each year

Please PRINT the following information:

Name: _____ NSSA# _____

Date of Birth: ____/____/____ Gender: Male Female

Address: _____

City: _____ State: _____ Zip: _____ Country _____

Contact Phone: _____ E-mail Address: _____

Years experience as a skeet referee: _____

Referee experience in other sports (list sports & years) _____

- *Official Referee: includes referee patch, card and handbook with information appearing on the NSSA website.*

I believe in the aims and purposes of the National Skeet Shooting Association and will enforce the official rules in all shoots in which I officiate.

Signature of Applicant: _____

The following must be filled in by the official/officer giving the examination.

This is to certify that the above applicant has been administered the official NSSA referee examination for the ____ shoot year and that he/she has fully qualified.

Signature of Examining Officer: _____ Date: _____

Representative Club or Assn: _____

The following must be filled in by an Officer of the State Association

This will certify that the above applicant has been approved:

Signature of State Official: _____

Office Held: _____ Date: _____

***Credential fee is \$5.00**

Payment: Cash ____ Check # _____ Credit Card: _____ Exp date: __/__/__ CVC _____