



# FOOTBALL DIVISION

# 2012 SEASON POINTS

FIRST NAME

MIDDLE NAME



LAST NAME

TASO ID # (REQUIRED)



ONLY ENTER PHONES, ADDRESS OR E-MAIL IF IT IS DIFFERENT FROM LAST YEAR

HOME PHONE NUMBER

WORK PHONE

EXT

CELL PHONE



MAILING ADDRESS

CITY

STATE

ZIP




E-Mail ADDRESS

CHAPTER NAME

CHAPTER CODE




<b>REGIONAL CLINIC</b> 3 POINTS EACH <input type="text"/>	+	<b>ON-FIELD CLINIC</b> 5 POINTS EACH <small>(ENTER STATE MEETING ON-FIELD CLINIC IN THE STATE MEETING SECTION)</small> <input type="text"/>	+	<b>DISTRICT MEETING</b> 2 POINTS <input type="text"/>	+	<b>TEST SCORE</b> 100 - 90 = 8 88 - 80 = 6 78 - 70 = 4 < 70 = 0 <input type="text"/>	=	<b>EDUCATIONAL POINTS</b> NO MAXIMUM <input type="text"/>
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<b>SCRIMMAGES</b> 1 POINT/EACH <input type="text"/>	+	<b>CHAINS/CLOCK</b> ½ POINTS/GAME <small>INCLUDES COLLEGE GAMES BUT NOT SEMI-PRO OR PRO</small> <input type="text"/>	+	<b>SUB VARSITY GAMES</b> ½ POINTS/GAME <input type="text"/>	+	<b>Varsity Games</b> 2 POINTS/GAME <small>INCLUDES COLLEGE GAMES BUT NOT SEMI-PRO OR PRO</small> <input type="text"/>	=	<b>GAME POINTS</b> <input type="text"/>
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<b>STATE MEETING POINTS</b>						
<b>STATE MEETING ATTENDANCE</b> 6 POINTS <input type="text"/>	+	<b>STATE MEETING ON-FIELD CLINIC</b> 5 POINTS <input type="text"/>	+	<b>BREAK-OUT MEETING ATTENDANCE</b> 1 POINT PER SESSION HOUR <input type="text"/>	=	<b>STATE MEETING POINTS</b> <input type="text"/>

As Secretary and/or President of the Chapter, I approve the above data as an accurate account of this officials seasons activity.

<b>TOTAL SEASON POINTS</b>
<input type="text"/>

**PLEASE READ CAREFULLY: I understand and agree that:**

- In accepting game assignments from the Chapter, I am acting as an independent contractor.
- I understand that I am protected by a Liability and Accident policy while a member in good standing of TASO. Coverage applies while conducting officiating activities and both subject to policy limitations and a deductible on the accident policy. The TASO website should be referred to for coverages and other conditions.
- I will comply with all TASO and Chapter Policies and Procedures and understand that TASO at their discretion may conduct background checks.
- 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 (1) been convicted of a state or federal misdemeanor or felony offense, (2) been arrested on a pending state or federal misdemeanor or felony charge, or (3) received deferred adjudication or other deferred sentencing for a state or federal misdemeanor or felony offense. Contradictions with (1), (2) or (3) above are NOT automatic grounds for denial of membership. Please submit details with application for Disciplinary Appeals Committee review.*

**I certify that this information is true and correct and understand that TASO may verify all or any portion of this application, including nationwide background criminal searches.**

Member Signature

Date