

**JOHN TIMMONS' OREGON STATE
SPONSORSHIP REQUEST TO ATTEND UMPIRE
SCHOOL – YEAR 20__**

Name _____ District _____ League _____

Street Address _____ City _____

Telephone # _____ E-mail Address _____

Years in Little League _____ Years as an Umpire _____

Prior Umpire Schools/Clinics Attended and Approximate Year Attended:

Tournaments Worked and Approximate Year:

Other Little League Activities (Grounds, Concessions, etc.):

Do You Have Children In Your League? Yes _____ No _____

Are You Paid To Do Little League Games? Yes _____ No _____

What Is Your Reason For Umpiring? _____
