



PIAA DISTRICT ONE OFFICIAL PLAYOFF REGISTRATION FORM

NAME: _____ SPORT: _____

Address _____ City _____ State _____ Zip _____

Home # (____) ____ - _____ Cell # (____) ____ - _____ E-Mail: _____

PIAA Chapter Affiliation: _____ Years as PIAA Official: _____

Please list any potential conflicts that might prevent you from working certain District One or PIAA playoff contests:
(mark N/A if not applicable)

- School District Employment _____
- League Assignor _____
- Current Coach _____
- Siblings/Family Members Associated with Playoff teams _____
- Other: _____

List years you attended the PIAA Convention: _____
(Convention attendance is needed for PIAA State playoff consideration)

The three steps for consideration to officiate District 1 playoffs:

1. By returning this completed form you are requesting consideration officiating assignments in postseason play.
2. Are you in good standing with your PIAA chapter? Y N (circle one)
3. Please provide other relevant information:

Officials must return this form to your Chapter Secretary by:

- September 15th - Fall Championships
- January 15th - Winter Championships
- April 15th - Spring Championships

Chapter Secretary will forward all Registration Forms to the PIAA D1 Official's Representative