

PIAA DISTRICT ONE OFFICIAL PLAYOFF REGISTRATION FORM

NAME:	ME: SPORT:			
Address	City	State	Zip	
Home # () Cell # (_)]	E-Mail:		
PIAA Chapter Affiliation:	Ye	ears as PIAA Official:		
Please list any potential conflicts that might prevent (mark N/A if not applicable)	you from working certa	in District One or PIAA p	layoff contests:	
 School District Employment 				
 League Assignor 				
Current Coach				
• Siblings/Family Members Associated with I	Playoff teams			
• Other:				
List years you attended the PIAA Convention : (Convention attendance is needed for PIAA State pla				
The three steps for consideration to officiate Dist	rict 1 playoffs:			
1. By returning this completed form you are re	equesting consideration of	officiating assignments in	postseason play.	
2. Are you in good standing with your PIAA c	hapter? Y N (circ	le 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