

**CHESAPEAKE REGION  
SCOREKEEPER INFORMATION  
CLINIC REGISTRATION FORM**

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Telephone(Home)\_\_\_\_\_ (Cell)\_\_\_\_\_

Email\_\_\_\_\_

Scorekeeper Status: ( )Candidate ( )Provisional ( )Regional ( )National

Referee Status: must also be a certified scorekeeper  
( )Candidate ( )Recreation ( )Provisional ( )Regional ( )National

Playing Status: ( )Player ( )Coach ( )Rec Player ( )Non Player

Scorekeeping Interests:

- ( ) I am interested in rating scorekeepers
- ( ) I am interested in working as a non-playing scorekeeper at Regionals
- ( ) I am interested in becoming a National Scorekeeper

**In order to be a certified scorekeeper you must also register with the region. If you are a player make sure your team registers you. If you are a scorekeeper/referee only, you need to register yourself.**

Clinic Site:\_\_\_\_\_Clinic Date:\_\_\_\_\_

Written Exam Score:\_\_\_\_\_