

## ISCF Event Official LICENSE - REGISTRATION APPLICATION

Print out This form & **MAIL** to the **ISCF** With Your Application Fee for ONE Certification & \$20 For Each Additional - Representatives are \$100.00 (*No Discounts For REPRESENTATIVE*) Add \$5.00 to total If Paying by Visa/MC. Your Fee includes Your ISCF Officials Shirt.



**CREDIT CARDS** Will Be Charged Thru Our ISCF Graphics Department and **Say FOSTER GRAPHICS on your statement.** FAX: (916) 663-4510

**- - "PLEASE PRINT NEATLY" - -**

**If we cannot read your printing, YOUR APPLICATION WILL NOT BE ACCEPTED.  
Application Forms WITHOUT FEES will be Disposed of.**

1. First & Last Name \_\_\_\_\_ AGE: \_\_\_\_\_

2. P.O. Box Or Physical Street Number: \_\_\_\_\_

3. City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

4. Contact Number For Officials Page: (\_\_\_\_\_) \_\_\_\_\_

5. **BELOW FEES ARE PER YEAR.** (Fee Includes ISCF Officials Polo Shirt) You are applying to be an Official ISCF:

- \_\_\_\_\_ **JUDGE - \$40 – \_\_\_\_\_ RENEW: \$20**       \_\_\_\_\_ **TIMEKEEPER - \$40 – \_\_\_\_\_ RENEW: \$20**
- \_\_\_\_\_ **REFEREE - \$40 – \_\_\_\_\_ RENEW: \$20**       \_\_\_\_\_ **GATE KEEPER - \$40 – \_\_\_\_\_ RENEW: \$20**
- \_\_\_\_\_ **INSPECTOR - \$40 – \_\_\_\_\_ RENEW: \$20**       \_\_\_\_\_ **REPRESENTATIVE - \$100 – \_\_\_\_\_ RENEW: \$50**

6. **LICENSE RENEW:** If renewing your ISCF Officials License and want a **NEW OFFICIALS SHIRT**, Please Check the line to **RIGHT** and **ADD \$20.00 To your Total.** **NEW SHIRT: \_\_\_\_\_ CHECK SHIRT "SIZE" BELOW.**

**7. EXPERIENCE - QUALIFICATION**

- \_\_\_\_\_ I have attached a letter explaining my qualifications to be an ISCF Event Official.
- \_\_\_\_\_ I took an ISCF Certification Course.
  - WHEN: \_\_\_\_\_
  - WHERE: \_\_\_\_\_
  - ISCF INSTRUCTOR: \_\_\_\_\_
- \_\_\_\_\_ Due to My Experience I Was Approved without an ISCF Certification Course.
  - Who was the ISCF Official that Approved You: \_\_\_\_\_
  - WHEN & WHERE: \_\_\_\_\_

8. **MANDATORY:** E-mail us your headshot photo in a jpg format to [info@iscfmma.com](mailto:info@iscfmma.com)

9. What SIZE Polo Shirt do you wear? \_\_\_S \_\_\_M \_\_\_L \_\_\_XL \_\_\_XXL Add \$10) \_\_\_XXXL (Add \$15)

10. I certify the above Is true and I confirm so by my signature here: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

<p><b>Please send this Form and Fees to: ISCF Attn: OFFICIALS LICENSE - REGISTRATION</b>  <b>P.O. Box 1205, 9250 Cypress Street, Newcastle, CA, 95658, USA - (916) 663-2467 - FAX: (916) 663-4510</b>  <b>Registration Forms WITHOUT FEES will be Disposed of.</b>  <b>IF PAYING BY CREDIT CARD PLEASE PRINT NEATLY! CHECK ONE: _____ VISA -OR- _____ MASTERCARD</b></p>		
<p>CC#: _____</p> <p>PHONE: (_____) _____</p>	<p><b>AMOUNT TO CHARGE</b></p> <p style="text-align: center;">\$ _____</p> <p style="text-align: center;"><b>+\$5 For CC Charge</b></p>	<p><b>CARD EXPIRES</b></p> <p style="text-align: center;">DATE _____ / _____</p> <p>3 DIG SEC CD: _____ - _____ - _____</p>
<p><b>www.ISCFMMA.com</b></p>		