



Inland Volleyball Officials Association

<http://ivboa.org>

(Please print legibly so all information can be read and understood)

Name: _____ Home Phone: () _____

Address: _____ Cell Phone: () _____

City: _____ Zip Code: _____

E-Mail Address: _____ (print clearly)

Have you been "*convicted of a felony*"? YES NO If Yes, please explain _____

Total number of years of volleyball officiating experience: _____

Total number of years officiating high school volleyball: _____

I attest, under the penalty of perjury, that all of the above information is true and correct. I furthermore understand that my knowingly providing false and/or omitting information may be grounds for the immediate revocation of my membership and other sanctions.

Signature

Date

Please return with your dues

Bill Dickerson
Secretary/Treasurer, Inland Volleyball Officials' Association

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