

2016 MONTANA AMERICAN LEGION UMPIRE ASSOCIATION

NAME: _____

ADDRESS: _____

CITY & ZIP: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

WHAT TEAMS DO YOU UMPIRE FOR: _____

**DUES ARE \$25 IF YOU ARE GOING TO MAKE CLINIC PLEASE
ADD \$5.00 TO THE FEE.**

THANK YOU FOR BEING A GREAT PART OF AMERICAN LEGION BASEBALL.

MAIL TO: DUANE MEIERS 2321 Wyoming st. Missoula, MT 59801