

# Richmond Recreation APPLICATION FOR SPORTS OFFICIALS & OTHER CONTRACTED OUT LABORERS

# (Please Print)

Position Applied For		Date of Application	
Last Name	First Name	Middle	Name
Address	City	State	Zip Code
Telephone Numbers		Social Security Number	
E-Mail Address			
Are you 18 years of age or older?		Yes	No
Are you 14 years of age or older?		Yes	No
If selected, can you provide writt	en evidence that you ar	e authorized to work in the Yes	
Do you have a valid driver's licen	se?	Yes	No
Have you ever worked for Richmo If yes, give date		Yes	No
Have any of your friends or relative	ves worked for Richmo	nd Recreation before?	
If yes, give individu	al's name and relation	Yes ship	No
If selected as an official, the date	e you are available to s	tart.	
Have you ever been convicted of a (conviction will not necessarily di	squalify applicant from		No icial)

		<b>EDUCATION</b>		
	Name and Lo	ocation	Course of Study	Diploma/ Degree
High School			·	
Undergraduate/ College				
Graduate/ Professional				
Technical/ Other				
YesNo Branch of Service		yes,  Number of	years served	
ank Achieved Occupational Specialty				
Special Training:				
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				T include relatives.
Name 1.	Contact Number	Business or Personal	Years Known	E-Mail
1.				
2.				

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

3.

## RICHMOND RECREATION

#### SPORTS OFFICIAL APPLICATION

(Please Print)

# **Sports Interested in Officiating/Etc.**

☐ Youth Baseball 13U/18U	☐Youth Basketball-2 <sup>nd</sup> /3 <sup>rd</sup> Grade
☐ Youth Softball 13U/18U	☐Youth Basketball-4 <sup>th</sup> /5 <sup>th</sup> Grade
☐ Youth Baseball Machine Pitch	☐Youth Basketball-6 <sup>th</sup> /7 <sup>th</sup> Grade
☐ Youth Softball Machine Pitch	☐Basketball Clock Operator
☐ Youth Coach Pitch	☐Youth Soccer U14/U12
☐ Adult Co-ed Slow Pitch Softball	☐Youth Soccer U10/U8
☐ Youth Flag Football	☐Youth Soccer U6/U4
☐ Youth Volleyball	☐Adult Volleyball Supervisor

# **Richmond Recreation Sports Official Guidelines**

- 1. Prior to selection, individuals interested in becoming a Richmond Recreation official must:
  - a) Fill out an application and other paperwork
  - b) Interview
  - c) Enroll (through the Recreation Department only for select sports) in a prerequisite screening and training course, specialized in the sport of interest. Prerequisite training consists of a rules and mechanics meeting, (two) written tests, and scrimmage training.
  - d) After one passes prerequisite tests and demonstrate competency in the training and the scrimmages, one will become a paid official for future Richmond Recreation games.
  - e) This process takes place before each sport season.
- 2. Paid officials must be at least 14 years of age.
- 3. Officials must supply their own uniforms (must meet Richmond Recreation apparel standards for each sport)
- 4. Officials must supply their own equipment; (i.e. whistles, pitch counters, etc.)
- 5. Officials need to bring their own water. (Richmond Recreation will not supply officials with free food or drinks from the concession stands.)
- 6. Officials must sign up for Richmond Alert (at www.cityofrichmondmo.org) so they will be updated on game day cancellations or changes.
- 7. All officials must have the ability to be professional at all times during the game, even in moments of adversity.
- 8. In order to be paid, officials must fill out Sport Score Sheets/Time Cards and sign them.

Have you ever been convicted of a crime against a minor?	Yes	No
If yes, explain:		
Why are you interested in being a sports official?		
Why do you think you would make a good official for Richr	nond Recreation?	
Please list any special training, skills, experience you have h	ad that would make	e you a good
candidate as a Richmond Recreation Official:		
Please list any special certifications you possess (i.e. CPR, M.	ISHSAA Certificati	on, etc.):
Previous volunteer/work experiences:		
Anything else you would like the Richmond Recreation Dep	artment to know?	

# **2017 Pay Scales**

	Y	οι	ıth	Bask	etball	Leag	ae
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Division	*amount per official per game	officials needed per game
2nd & 3rd Grade Division	\$12.00 per game	2
4th & 5th Grade Division	\$15.00 per game	2
6th & 7th Grade Division	\$20.00 per game	3
Scoreboard Operator	\$8.00 per game	1

Youth Soccer League

Division	*amount per official per game	officials needed per game
U6/U4	\$12.00 per game	1
U10/U10	\$15.00 per game	2
U12	\$30.00 per game	2
U14	\$30.00 per game	2

Youth Softball & Baseball League

Division	*amount per official per game	officials needed per game
T-Ball	N/A	No Official
Coach Pitch	\$12.00 per game	1
Machine Pitch-Plate	\$20.00 per game	1
Machine Pitch-Field	\$12.00 per game	1
12U & 14U-Plate	\$30.00 per game	1
12U & 14U-Field	\$22.00 per game	1

Youth Football League

Division	*amount per official per game	officials needed per game
Junior Division	\$30.00 per game	1
Senior Division	\$30.00 per game	1

Youth Volleyball League

Division	*amount per official per game	officials needed per game
4th grade-7th grade	\$12.00 per game	1
Adult Line Judges	Volunteer	2

Adult Softball League

Division	*amount per official per game	officials needed per game
Adult-plate	\$20.00 per game	1
**Adult-field	\$20.00 per game	1

Adult	Volleyb	all Leagne

Division	*amount per official per game slot	supervisor needed per game
Adult	\$8.00	1

## **Notes About 2017 Pay Scale**

#### 1. Officials are paid per game.

- 2. \*If an official does not officiate the whole game, pay will be deducted (please make notes you your time card).
  - a. If you get sick or for any reason have to leave the game early, pay will be deducted. Please make notes on your time card.
- 3. \*If there is less than the appropriate officials needed per game, then the official(s) working the game will get "time and half"
  - a) ex. One referee shows up for the second and third grade basketball game, they will be paid \$18.00 for the game they worked.
  - b) ex. One referee shows up for the fourth and fifth grade basketball game, they will be paid \$22.50 for the game they worked.
  - c) ex. One official shows up for the U14 soccer game, they will be paid \$45.00 for the game they worked.
- 4. Richmond Recreation reserves the right to make appropriate pay scale changes if needed.

### **Pay Periods for Officials**

- 1. Pay checks will be <u>mailed</u> out on Fridays.
- 2. Work performed during youth basketball season, youth soccer season, adult volleyball season, youth volleyball season, youth football season, and adult softball season will be paid/mailed out weekly. (For exact details see Recreation Department personnel.)
- 3. Work performed during baseball and softball season will be every two weeks. (For exact details see Recreation Department personnel.)
- 4. If Score Sheets/Time Cards are not filled out (by the official), filled out appropriately, or are not signed, you might not get paid, or it will take longer than a week to process your pay check. It is the official's responsibility to fill this documentation out after their work performed.
- 5. If you have an address change please e-mail the Human Resource Director (swilliams@cityofrichmondmo.org) and inform her of the change.

For More Information about officiating please e-mail: Hwilliams@cityofrichmondmo.org

#### LIABILITY RELEASE AND HOLD HARMLESS AGREEMENT FOR OFFICIALS, CLOCK OPERATORS, AND OTHER CONTRACTED OUT LABORERS

Name of Official:			
Positions working:			
Address:	Phone:	E-mail:	
Emergency Contact:	Relation:	Phone Number:	

Upon signing and submitting this form, I understand and acknowledge that my services/labor performed in regard to the above program, project, activity or special event are "work for hire", assigned to assist with the general activities of the captioned program. I am not eligible for benefits such as worker's compensation and health insurance coverage through the City of Richmond.

<u>I understand that program activities could involve physical labor and/or travel to various locations, and it is the responsibility of each official to participate only in those activities of which he/she is physically capable, and understand that I may decline to do any activity at any time.</u>

Due to the nature of some program activities, I acknowledge that my participation could involve risk of bodily injury, illness, death, property damage, or other risks associated with these activities, and I assume full responsibility for such, including those arising from travel to and from such activities.

#### **Medical Coverage:**

I agree and acknowledge that the City of Richmond, Missouri is not responsible or liable for my health and safety. Recognizing this, however, I wish to, and hereby do, grant the City of Richmond, Missouri full authority to take or not take in its sole discretion, whatever actions it may consider warranted under the circumstances for my health and safety during my participation in this Program, and I hereby release each of them from liability for any such decisions or actions as may be taken in connection therewith. The authority granted in the preceding sentence shall include the right in the sole discretion of the City of Richmond to place me, at my own expense, and without any further consent, in a hospital, for medical services and treatment, or if no hospital is readily accessible, to place me in the hands of a local doctor for treatment.

#### **Liability Waiver:**

City of Richmond does not warrant or guarantee in any respect the physical condition of the equipment or vehicles that might be used in connection with the program, nor the competency or credentials of any individual participant associated with this Program.

Furthermore, in consideration of the opportunity to participate in the above referred activities, with full knowledge and appreciation of the risks involved, and full understanding to the above

issues/conditions, I hereby release and hold harmless the City of Richmond, its faculty, staff, and representatives (Releases)

from all manner of action and actions, cause and causes of action, suits, claims, or demands of nature, including personal injuries, death, damages or property loss resulting from said participation and related travel. In addition, I agree to comply with all rules applicable to my participation in my activities.

I intend this agreement to bind my spouse, family, children, heirs, assigns, and personal representative and shall be deemed as a release, waiver, discharge and covenant not to sue the releases. I hereby acknowledge that this waiver and acknowledgement applies to my participation or my child's participation at any time, now or in the future, with the aforementioned Program.

I have read and understand the foregoing, and, as necessary, have had the opportunity to have reviewed by my guardian and/or legal counsel, and hereby agree to be bound by same. I further attest that I am fully competent; that no oral statements apart from this agreement have been made; and I expressly agree that this release is intended to be as broad and inclusive by the laws of the State of Missouri.

Signature of Witness	(Date)	Signature of Laborer (Date)
Printed Name of Witness		Printed Name of Laborer
		DOB:
		Address:
 If under 1	8 years of age: leg	gal guardian's signature (Date)
II under 1	to years or age. leg	an guardian 3 signature (Date)
L	egal guardian's na	ame (PLEASE PRINT)