



# Cooperstown Dreams Park 2023 Umpire Program Participation Form



Please fill out the following information and fax to us at: (704) 630-0737

Email to us at: [baseballoperations@cooperstowndreamspark.com](mailto:baseballoperations@cooperstowndreamspark.com)

Or mail to us at:

Cooperstown Dreams Park  
c/o Umpire Program  
330 South Main Street  
Salisbury, NC 28144

[www.cooperstowndreamspark.com](http://www.cooperstowndreamspark.com)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you a returning umpire? Y / N If yes, when did you attend? \_\_\_\_\_

Have you been a CDP crew chief? Y / N If yes, what year(s)? \_\_\_\_\_

Weight: \_\_\_\_\_ Height (inches): \_\_\_\_\_ Ring Size (no 1/2 sizes): \_\_\_\_\_

Years of Umpiring Experience: \_\_\_\_\_

DOB: \_\_\_/\_\_\_/\_\_\_ Gender: M / F (must be 18 at the time you're attending)

Do you have personal or association health/liability insurance? Y / N

Name of Umpire Association: \_\_\_\_\_ How many members? \_\_\_\_\_

Association President: \_\_\_\_\_ Daytime Phone Number: \_\_\_\_\_

Are you familiar with: 2 man / 3 man / 4 man / 6 man

(Circle all that apply)

What level of baseball have you umpired (ex. high school, college)? \_\_\_\_\_

Umpiring achievements (ex. states, regionals, sectionals)? \_\_\_\_\_

Have you graduated from any professional umpiring schools? Y / N

Have you attended any clinics run by professional umpires? Y / N

What date(s) would you like to attend in the summer of 2023?

(Please indicate preferred dates, with 1 being your first choice.)

- |                           |                            |                                 |
|---------------------------|----------------------------|---------------------------------|
| ____ May 28 thru June 3   | ____ July 3 thru July 9    | ____ August 2 thru August 8     |
| ____ June 3 thru June 9   | ____ July 9 thru July 15   | ____ August 8 thru August 14    |
| ____ June 9 thru June 15  | ____ July 15 thru July 21  | ____ August 14 thru August 20   |
| ____ June 15 thru June 21 | ____ July 21 thru July 27  | ____ August 20 thru August 26   |
| ____ June 21 thru June 27 | ____ July 27 thru August 2 | ____ August 26 thru September 1 |
| ____ June 27 thru July 3  |                            |                                 |

Team information: Team # \_\_\_\_\_ Team Name: \_\_\_\_\_

If you would like to participate in multiple tournaments, once you have received confirmation, visit [cooperstownteamumpire.com](http://cooperstownteamumpire.com). The only Official Dreams Park Umpire Website.

Cooperstown Dreams Park reserves the right, at any time, to cancel an umpires' participation. Umpires are required to obtain in writing individual week specific Certificates of Participation from Cooperstown Dreams Park. In addition, failure to comply with Dreams Park requirements, policies, or deadlines will also cause cancellation of an Umpires Certificate of Participation. Cooperstown Dreams Park prohibits use of any Umpire Certificate of Participation for promotion, solicitation or profit. The listed umpire contact is the only person eligible to discuss and/or change umpire information.