

Northern California Officials Association-South Enrollment and Code of Conduct

This form must be signed and returned to Association Secretary before games can be assigned.

Please be advised that officials who sign and return this code of conduct are NOT guaranteed any assignments within the NCOA-South Area

Name _____

Address _____ City _____ Zip _____

E-MAIL _____

Phone: (H) _____ (C) _____ (W) _____

I declare under the penalty of perjury that the following information I have provided is the truth, to the best of my knowledge:

Are you employed by a High School or School District? Yes _____ No _____ if yes, which schools: _____

Do you have a relative who works or attends an area high school? Yes _____ No _____ if yes, which schools: _____

I agree to abide by the by-laws of the NCOA South and the Rules and Regulations of the NCOA South Basketball Division. I fully understand that failure to do so can result in disciplinary action by the Board of Directors and/or NCOA. I further certify that I have not been convicted of a felony or misdemeanor offense which requires me to register as a sex offender. I understand the penalty for falsification is grounds for expulsion from the NCOA.

I understand that I am an **independent contractor** and not an employee of the CIF, Southern Sac-Joaquin Section, any Leagues, Schools or the NCOA-South or any of its sub-units.

As an **independent contractor**, I will not hold the Southern Sac-Joaquin Section CIF, NCOA-South, its sub-units, Assigner, Executive Board or Committees liable for any adverse action that may occur.

I understand and have read the above information and NFHS Code of Conduct for which I am subject to as a member of NCOA-South

Signature _____

Date _____

Print Name _____