2024 **SAVOA Membership Application**

❑ New ❑ Renewal ❑ Reinstatement

❑ Dual or Transfer (circle one) If Dual State Primary Chapter _____
If Transfer State Chapter From _____

Last Name: _____ **First/ Middle:** _____

Date of Birth: M: D: Y: **Gender:** Female ❑ Male ❑

Home Phone: ( ) - **Mobile Phone:** ( ) -

Work Phone: ( ) - **TASO ID#** _____

Street Address: _____ **City:** _____

State: TEXAS **Zip Code:** _____

Email: _____

Herein, San Antonio Volleyball Officials Association is referred to as, "Chapter", "SAVOA"
PLEASE READ CAREFULLY: I understand and agree that: 1. Membership in the Chapter and/or TASO does not guarantee game assignments. 2. I am responsible for informing the Secretary of any changes to my contact information as well as any change to my officiating availability/restrictions. 3. I will pay any applicable fee for canceling a game once I have accepted the game assignment. 4. TASO will provide accident insurance only for injuries sustained/arising from my officiating assignments subject to deductible and other policy limitations. 5. In accepting game assignments from the Chapter, I am acting as an independent contractor and as such, I am subject to being video/audio recorded and/or photographed. 6. I release all liability and hold harmless the Chapter, for the use of my likeness, and will not seek any form of compensation. 7. I will comply with the TASO and Chapter Policies. 8. All game assignments received through the Chapter are subject to revocation, cancellation or reassignment in the event I cease to be a member in good standing, or if it is in the best interest of the Chapter and/or TASO that the game be revoked, cancelled or reassigned. 9. I will file all required game reports as required by the Chapter and/or TASO and pay any applicable game fees, fines or assessments. 10. Except as listed on the attached sheet or as previously disclosed and ruled on by the Disciplinary Appeals Committee, I certify that, except for minor traffic offenses punishable by fine only, I have not (a) been convicted of a state or federal misdemeanor or felony offense, (b) been arrested on a pending state or federal misdemeanor or felony charge, or (3) received deferred adjudication or other deferred sentencing for a state or federal misdemeanor or felony offense. 11. I certify that this information is true and correct and I understand that TASO may verify all or any portion of this report (from TASO app. Rev. 08-2011). 12. I agree to abide by all SAVOA by-laws and operating procedures.

Signature _____ **Date** _____

NEW Member	To **APPLY** for SAVOA membership, submit this form, along with $25 local chapter dues* **You must also apply for TASO membership on TASO.org with state at the current newcomer rate, if you have never joined a TASO organization.**
DUAL Member	To **APPLY** for SAVOA membership (first time), submit this form, along with $25 local chapter dues*
RENEWING Member	To **RENEW** your SAVOA membership, submit this form, along with $25 local chapter dues* and any balance owed for assigning fees**
FORMER Member	To **REINSTATE** your SAVOA membership, submit this form, along with $25 local chapter dues* and any previous balance owed for assigning fees**

***Make checks for local chapter dues payable to: SAVOA, c/o Jeannie Thames, 13147 Feather Point, San Antonio, TX 78233**

Check # _____ **Cash** _____ **Date** _____ **By** _____