



California Interscholastic Federation
**San Diego Section Masters
Wrestling Championship**
Official's Application Form



Due Date: November 12, 2019

Official's Name:

E-mail Address:

Address:

City:

Zip:

Home Phone:

Cell Phone:

For SDCWOA Use

Requirements

- MIGS
- State Rules
- Training Hours
- Evaluation

Number of Seasons Officiating with SDCWOA:

Number of Seasons with Other Wrestling Associations (list):

Wrestling Officiating Experience:

Submit Completed Application to:

Name: Jim Davis - SDCWOA Sec.
E-mail: jdavis569@yahoo.com
Cell Phone: 619-328-7217
