



**KINGSTON & DISTRICTS NETBALL ASSOCIATION  
UMPIRE IN TRAINING COURSE**

**Name:** \_\_\_\_\_

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

**Mobile:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Age:** \_\_\_\_\_

*Please complete and print this form and submit a copy to the Umpire's Room at Dales Park*