

## ADOPT AN UMPIRE CLAIM SHEET

Date of Game	Stub or Game #	Ball Diamond	Division Ump	Office use

Name of Umpire \_\_\_\_\_

Phone# \_\_\_\_\_

Email for E-transfer for Payment \_\_\_\_\_

**Please staple umpire stubs to this sheet. Mail to SMSL Office by July 15.**

**SMSL Box 8700 Saskatoon, Sk S7K 6S5**