



INTERMEDIATE JUNIOR AWARD OF MERIT VERIFICATION FORM

Junior Participant Information

Name:	
U-FLI Club Affiliation (if applicable):	
Address:	City/State/Zip:

Accomplishments / Contributions

Instructions: To be used after completion of the Novice Junior Award of Merit requirements.
 For each event listed, the U-FLI™ Representative, Tournament Director, or Head Judge must sign this document to verify the Junior Participant's Accomplishments / Contributions at each event (See U-FLI™ Rule 7.4). Once 5 signatures have been obtained on 5 separate event weekends, this original form should be mailed to the U-FLI™ address for award processing or can be given to the U-FLI Rep at the tournament.

EVENT #1 - Check All That Apply:

<input type="checkbox"/> Ball Shagging	<input type="checkbox"/>	Handling a Dog	<input type="checkbox"/>	Scorekeeping
<input type="checkbox"/> Box Judging	<input type="checkbox"/>	Line Judging	<input type="checkbox"/>	Team Management Assistance
<input type="checkbox"/> Calling Passes	<input type="checkbox"/>	Scribe/Reaction Times	<input type="checkbox"/>	Other:

Tournament Name/Location: _____ Host Club: _____

Signature / Verification: _____ Date: _____

EVENT #2 - Check All That Apply:

<input type="checkbox"/> Ball Shagging	<input type="checkbox"/>	Handling a Dog	<input type="checkbox"/>	Scorekeeping
<input type="checkbox"/> Box Judging	<input type="checkbox"/>	Line Judging	<input type="checkbox"/>	Team Management Assistance
<input type="checkbox"/> Calling Passes	<input type="checkbox"/>	Scribe/Reaction Times	<input type="checkbox"/>	Other:

Tournament Name/Location: _____ Host Club: _____

Signature / Verification: _____ Date: _____

EVENT #3 - Check All That Apply:

<input type="checkbox"/> Ball Shagging	<input type="checkbox"/>	Handling a Dog	<input type="checkbox"/>	Scorekeeping
<input type="checkbox"/> Box Judging	<input type="checkbox"/>	Line Judging	<input type="checkbox"/>	Team Management Assistance
<input type="checkbox"/> Calling Passes	<input type="checkbox"/>	Scribe/Reaction Times	<input type="checkbox"/>	Other:

Tournament Name/Location: _____ Host Club: _____

Signature / Verification: _____ Date: _____

EVENT #4 - Check All That Apply:

<input type="checkbox"/> Ball Shagging	<input type="checkbox"/>	Handling a Dog	<input type="checkbox"/>	Scorekeeping
<input type="checkbox"/> Box Judging	<input type="checkbox"/>	Line Judging	<input type="checkbox"/>	Team Management Assistance
<input type="checkbox"/> Calling Passes	<input type="checkbox"/>	Scribe/Reaction Times	<input type="checkbox"/>	Other:

Tournament Name/Location: _____ Host Club: _____

Signature / Verification: _____ Date: _____

EVENT #5 - Check All That Apply:

<input type="checkbox"/> Ball Shagging	<input type="checkbox"/>	Handling a Dog	<input type="checkbox"/>	Scorekeeping
<input type="checkbox"/> Box Judging	<input type="checkbox"/>	Line Judging	<input type="checkbox"/>	Team Management Assistance
<input type="checkbox"/> Calling Passes	<input type="checkbox"/>	Scribe/Reaction Times	<input type="checkbox"/>	Other:

Tournament Name/Location: _____ Host Club: _____

Signature / Verification: _____ Date: _____