

**2017 ANNUAL
New Jersey Transportation Professionals Safety Training and
Applied Rodeo Skills**

JUDGE APPLICATION/ASSIGNMENT

NAME _____ PHONE # _____

EMPLOYER _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE _____

e-mail address: _____

CERTIFIED INSTRUCTOR ___ YES ___ NO

HAVE YOU JUDGED AT STATE PREVIOUSLY? ___ YES ___ NO

PREFERENCE OF EVENTS YOU WOULD LIKE TO JUDGE: _____

Circle T Shirt size-size ordered is the size to be received	S	M	L	XL	2XL	3XL	4XL
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(for use of competition officials only)

Return via Email to Joyce Forsberg at jforsberg@ebnet.org or Gretchen Biancone-Groff at ggroff@trenton.k12.nj.us

Reviewed by: _____ Date: _____

Event
Assignment: _____