

# PAVO New Member Registration

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

Board Name: \_\_\_\_\_

Mailing (Street) Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender:  Male  Female

Occupation: \_\_\_\_\_

USAV Rating: \_\_\_\_\_ Expiration Date of Current Rating: \_\_\_\_\_

*As a member of the Professional Association of Volleyball Officials, (PAVO), you are bound by the current Code of Ethical and Professional Conduct as adopted by the PAVO Board of Directors. The original Code was published in the ABO News; Volume 8, Number 4, August/September 1997. A copy of the current Code may be obtained from the PAVO central office (888/791-2074, email: pavo@pavo.org) or on the PAVO web page (www.PAVO.org).*

*I have reviewed the above information and confirm that it is accurate and correct to the best of my knowledge.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---

## PREFERENCES

### NOTE:

1. In your online PAVO member record (www.PAVO.org), you are able to mark your preference for delivery of the *PAVO/NCAA Rules Interpretation Newsletter* (distributed as needed) and the *Official Word* newsletter (5 editions per year). The default method is for **email delivery**. If you prefer to receive these publications via US Mail, please change your record in the online database.
2. You are also able to change your preference for the method of taking the annual examination. The default method is **online testing**. If you prefer to take the examination on a printed copy distributed by your board chair, please change your record in the online database.

---

**PAVO is committed to diversity and will only use the following data in an aggregate form for purposes such as reporting membership demographics, requesting grants, etc.**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> African American      | <input type="checkbox"/> Caucasian (non-Hispanic)        | <input type="checkbox"/> Hispanic       |
| <input type="checkbox"/> Native American       | <input type="checkbox"/> Asian American/Pacific Islander | <input type="checkbox"/> Multi-cultural |
| <input type="checkbox"/> Hearing Impaired/Deaf | <input type="checkbox"/> Physically Disabled             |   |

Your response is voluntary.