

SIMPSON COUNTY SCHOOL DISTRICT

Officials' Contract Agreement

I understand that I am an independent contractor officiating for Simpson County School District, a member of the Mississippi High School Activities Association. I also agree to abide by all rules and regulations of the MHSAA, with whom I voluntarily choose to affiliate, as well as those of the Simpson County School District.

I also understand that I am an independent agent choosing to affiliate with the MHSAA and Simpson County School District. Therefore, I release the MHSAA and Simpson County School District, from any liability or responsibility for any damage or injury incurred by me to myself or anyone else because of my officiating during the current registration year.

Furthermore, I understand that all taxes due on income collected by me because of my officiating are my responsibility to file and not the responsibility of Simpson County School District.

Finally, I acknowledge that Simpson County School District pays officials once a week for a week covering a Saturday to a Friday period. I understand this period will be mailed to me on the first working day after Sunday of the following week.

Name: _____

Date: _____

Officials

Signature: _____

Principal's Signature: _____