

## USTA OFFICIAL VISION EXAMINATION FORM

All USTA on-court Officials (those acting as Roving Umpire, Chair Umpire, and Line Umpire, and Referees who go on court) must submit to the USTA, within 12 months of the exam, a physician's or optometrist's statement attesting that the Official has 20/20 vision either corrected or uncorrected in each eye.

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Name of Official (print)

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USTA Member Number

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Address (Print)

**I hereby state that the data contained herein is a true and accurate record and personally attest to a 20/20 vision, corrected or uncorrected in each eye.**

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**Health Care Provider's Signature**

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**Date of Examination**

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**Health Care Provider's Name**

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**Health Care Provider's Phone Number**

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**Provider's Address**

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**Provider's Facsimile Number**

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**Date of Provider's Signature**

I hereby give my consent that this information may be forwarded to the USTA Officiating Department.

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Signature of Official Examined

**PLEASE UPLOAD THE COMPLETED FORM TO OFFICIALSFIRST.COM**