



Zebra-Secretary Console

Eastern Association of Intercollegiate Football Officials

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My Profile

* Required fields

Save

[View photo](#)

Date Last Updated: 3/19/2022 7:08:27 AM
Date Last Login: 3/22/2022 at 8:40 am

Updated By: Mara, Bill

First Name:* Bill

Day Telephone: (413) 445-5501
xxx-xxx-xxxx

Last Name:* Mara

Day Extension:

SSN:

Day Fax: xxx-xxx-xxxx

Address 1:* 202 Velma Ave

Evening Telephone: (413) 445-5501
xxx-xxx-xxxx

Address 2:

Evening Extension:

City:* Pittsfield

Evening Fax: xxx-xxx-xxxx

State:* Massachusetts ▾

Cell Phone: (413) 446-2425
xxx-xxx-xxxx

Zip Code:* 01201-8100

Email Address:* wbmara@hotmail.com

Alternate Email Address: wbmara@gmail.com

EIN:

If entering EIN, list Business Name:

Emergency Contact

Emergency Contact Name:*

Emergency Contact Phone: xxx-xxx-xxxx

Medical conditions

The "Email Address" field is used as your ZebraWeb.org username and is the only email address, used by the system, for ZebraWeb notifications and correspondence. The "Alternate Email Address" field is purely for additional contact info, no notifications are sent to this email.

Text Messaging is now available

If you select your provider from the drop down and you list your cell phone number, you will receive a text message for system notifications. This will be in addition to the email notifications you receive.

SMS/Cell Provider: NO TEXT MESSAGE ▾

Test SMS ☐

You can test your SMS Provider text message notification

Official ID #:
(NOT SSN)

#

School Affiliations

To delete an affiliation, remove the Affiliated School, set the Affiliation drop down to "Select affiliation.", remove the Date From, and remove the Date To data

Name of School	Affiliation	Date From	Date To
St. Joseph's High School	Attended school. ▼	1949	1953
<input type="text"/>	Select affiliation ▼	<input type="text"/>	<input type="text"/>
<input type="text"/>	Select affiliation ▼	<input type="text"/>	<input type="text"/>
<input type="text"/>	Select affiliation ▼	<input type="text"/>	<input type="text"/>
<input type="text"/>	Select affiliation ▼	<input type="text"/>	<input type="text"/>
<input type="text"/>	Select affiliation ▼	<input type="text"/>	<input type="text"/>

Date of Birth:

MM/DD/YYYY

Spouse Name:

(Max 50 Characters)

Employer:

Profession:

(Max 200 Characters)

Primary Position:

▼

Year Start Officiating:

▼

Secondary Position:

▼

Title:

Height:

Weight:

Reference 1:

Reference 2:

Member From:

Member To:

Appl Fee Rec'd:

Classification:

Membership ID
Number:

Chapter:

Miscellaneous (notes):

(Max 1,500 Characters)

1987-Present Eaifo Western New England Chapter Secretary Treasurer
2010-Present Eaifo Board of Directors Secretary Treasurer
1978-2005 Ecac Field Official Referee

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