

Application to Officiate 2014 Nationwide U.S. Masters Swimming Spring National Championship Santa Clara, California May 1 - 4, 2014



Name:	LMSC:		or LSC:		
Contact information: (Please indicate the best co	ntact method to use)			
Address:					
City: Stat	e:	Country:	Zip:		
Phone (best to use):	Other Pho	ne:			
E-mail Address:				e:	
Positions currently certified: (Indicate higher					
Leve	el	Expiration D	ate		
Stroke & Turn ———					
Chief Judge	<u></u>		<u> </u>		
Starter					
Deck Referee					
Administrative Referee					
Certifying Organization: USMS Have you previous worked a USMS National Char	npionship? Yes			Other:	
I am available to work the following sessi					
All Sessions: Thursday, May 1s		Friday, Ma	v 2nd:		
Saturday, May 3rd: Sun		- ,	,		
If you also plan to compete in the meet - Eve	• • •	npeting in:			
Duefers are for a science and for the company is in a					
Preference for assignment (note some positions This meet has been approved by USA-Swimming		-	ase indicate whe	re evaluation	
for N2/N3 certification is requested and specify i	==				
of officials and evaluators present at the meet.					
Admin Referee: Deck Refer	ee: Deck Referee:		Chief Judge:		
Starter: Stroke & Tu	roke & Turn:		Wherever needed:		
Uniform is white polo shirt over navy pants, sho	rts or skirt, white so	cks and shoes.			
Return application to the Meet Referee: Jacki	Allender	email: seewui	 n@proaxis.com		
	/ Acey Way				
Corvallis	, OR 97330				
(541) 75	53-5681				

Assignments will be made at the sole discretion of the Meet Referee. All Officials will be required to attend briefings prior to the beginning of each session.