

Application to Officiate U.S. Masters Swimming 2012 Spring National Championships Greensboro, North Carolina April 26-29, 2012



Name:		LMSC:	or LS(C:
Contact information: (Please indicate th	e best contact me	ethod to use)		
Address:				
City:	State:	Cou	ntry:	Zip:
Phone (best to use):		Other Phone: _		
				nirt Size:
Positions currently certified: (Indic				osition)
	Level	Expi	ration Date	
Stroke & Turn		_		
Starter				
Deck Referee				
Administrative Referee		_		
Certifying Organization: USN	AS USA	۹-S NCA	A YMCA	A Other: _
I am available to work the followi	ng sessions:			
All Sessions: Thursday,	April 26th:	Fr	iday, April 27th:	
Saturday, April 28h:				
If you also plan to compete in the mo				
Preference for assignment (note some This meet has been approved by USA-St for N2/N3 certification is requested and of officials and evaluators present at the	vimming as an O specify initial or	fficials Qualifying I	Meet. Please indica	
Admin Referee: Dec	eck Referee:		Chief Judge:	
			erever needed: _	
Uniform is white polo shirt over navy po	ants, shorts or sk	rt), white socks an	d shoes.	
Return application to the Meet Referee:	Joel Black	emai	l: Joelblack@mind	spring.com
	7570 Brookfield [
	Lewisville, NC 2	7023		
	(336) 817-2838			

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.