

Officials Request for Assigned Position at Montana Swim Championship Meets

Moot.			
Meet:		Meet Dates:	
Location:		LSC: MT	
E-mail form to: (meet	referee)	Phone:	
Deadline to apply:		Please consider me for assignments at the above meet.	
Name:		USAS Reg #	
		Phone:	
Mailing Address:			
	ving sessions: ALL Ses		
	Friday Prelims:		
Saturday Prelims:		·	
	•	•	
	Sunday Prelims:	•	
		Men's or Women's Cut:	
Current Certificatio	ons: Level	LSC/Natl Cert L2, N2, N3) Years/Months	
	Stroke and Turn:		
	Chief Judge:		
	Starter: Deck Referee:		
Δ	dministrative Referee:		
А	Meet Referee:		
Requested Positions Number in order of pre	ference.)	sion to be assigned as chief judge, starter, deck referee or admin refere	
	Stroke and Turn: _		
	Ũ		
А	dministrative Referee:		
Notify applicant: Yes, you were select	ed for the following p	osition(s):	
		Deck Ref Admin Ref	