

Application to Officiate 2014 Marriott U.S. Masters Swimming Summer National Championship College Park, Maryland August 13-17, 2014



Contact information: (Please indicate the	best contact method	to use)			
Address:					
City:	State:	Country: _	Zip	:	
Phone (best to use):	Other	Phone:		_	
E-mail Address:	Shirt Size:				
Positions currently certified: (Indica	te highest level of cert	ification N1 / N2/ N3	for each positior	າ)	
	Level	Expiration Date			
Stroke & Turn			_		
Chief Judge					
Starter					
Deck Referee					
Administrative Referee					
Certifying Organization: USM	S USA-S	CSOA	YMCA	Other: .	
Have you previous worked a USMS Nation	nal Championship? Ye	es No	_		
Lam available to work the followin	a coccions:				
I am available to work the followin	_	Thursday	Λυσ 1/1+b+		
		Thursday, Aug 14th:			
Friday, Aug 15th: Satur If you also plan to compete in the med	· -	=	_		
	· · · · · · · · · · · · · · · · · · ·				
Preference for assignment (note some po	ositions may have alre	eady been filled):			
This meet has been approved by USA-Swi		., .			
for N2/N3 certification is requested and s_l of officials and evaluators present at the r		Note that evaluations	may be limited t	by the number	
		Chief Judge			
Admin Referee: Deck	Referee:	Chief Judge	•		
Starter: Strok	e & Turn:	Wherever r	Wherever needed:		
Uniform is white polo shirt over navy par	nts, shorts or skirt, wh	ite socks and snoes.			
Uniform is white polo shirt over navy par Return application to the Meet Referee:	nts, shorts or skirt, wh James Carey		vim1@outlook	. <u>com</u>	
Return application to the Meet Referee:	James Carey 101 Woodberry Stree	email: <u>terpsv</u> t	vim1@outlook	.com	
Return application to the Meet Referee: 4	James Carey	email: <u>terpsv</u> t	vim1@outlook	.com	

briefings prior to the beginning of each session.