EASTERN ZONE SECTIONAL MEET APPLICATION TO OFFICIATE

Applicant must be a member of USA Swimming and an LSC certified official.	
Name:	_ LSC:
Address:	_ Home Phone:
City,State, Zip:	Work Phone:
E-Mail Address:	
Current LSC Certification:	No. of Years
Current National Certification and Expiration:	
Current National Championship Certification and Expiration:	
ALL APPLICANTS MUST ATTEND MANDATORY OFFICIAL'S BRIEFINGS ONE HOUR BEFORE EACH SESSION OF THE MEET THAT THEY WORK.	
	ist Meadow, Long Island, NY irfax, VA
Sectional Site Desired: I will serve a	t all sessions: Yes No
I can't serve all sessions. My choices for individual sessions are checked below:	
ThursdayTimed FinalsFridayPrelimsFinalsSaturdayPrelimsFinalsSundayPrelimsFinals	
Shirt Size: (Please circle one) XS S M L XL 2X 3X (This is for host planning ONLY—not guaranteed)	
Please check your assignment request: Deck Referee	Starter Chief Judge
This application must be received by the Eastern Zone Officials Chair no later than 1/15/01 to be considered for <i>specific assigned positions (Deck Referee, Starter, Chief Judge</i>). Assigned positions will be notified no later than 1/30/01. Applications for non-specific deck positions will be accepted until 2/15/01. Mail or Email to: Eastern Zone Officials Chair – JoAnn Faucett	
Cha (51	dwin Drive arlton, NY 12019 8)399-0494 nail: faucettjm@aol.com