Eastern Zone All-Star Championships APPLICATION TO OFFICIATE

Applicant must be a current member of USA Swimming and an LSC Certified official for at least one year.

EASTERN ZONE ALL-STAR MEET

Gloucester County Institute of Technology Sewell, New Jersey March 31 – April 2, 2005

Meet Referee, Fred Killian FK42@aol.com

____LSC CODE:____

Address: Home Phone:

City, State	e, Zip:			State	, _{Zip}		
CURREN'	T CERTIFICATIO	NS: (Circl	e and complete th	e following)			
LSC Certification:		INIT	RENEWED	Position	Exp Da	Exp Date:	
National Certification:		INIT	RENEWED	Position:	Exp Da	Exp Date:	
National Championship:		INIT	RENEWED	Position:	Exp.Da	ate:	
I would ap	opreciate a receipt b	y e-mail. I	My e-mail address	Please Print Ca	refully		
	I will serve at all session of the meet				(If no, please fill out the following.)		
	I Cannot serve at all so Individual sessions are (Please designate prel	e checked as f		Morn Prelims	_ Aft Tim Finals Aft Tim Finals Aft Tim Finals	Evng Finals Evng Finals Evng Finals	
	SHIRT SIZE: (check one) S M L XL 2X L (This is for possible Host Planning only, shirts are not guaranteed)						
Accepted :	applicants must atte	end mandat	ory official's brie	fings as specified i	n the acceptance lette	er.	
Deck Refe including a received.	eree, Starter, Chief I available Referee, S	udge). Ap starter and vill be sent	plications for non CJ positions. Ear via e-mail shortly	-specific deck posity closure may occurred after the deadline.	titions will be accepted tur if an excessive number closure dates. After	assigned positions (i.e., d until MARCH 30, 2005 mber of applications are March 30, interested	
Please che	ck your assignmen		Deck Referee	Starter	Chief Judge S &	T Judge	
					: 302-529-5549. Quat 302-994-3389 or	uestions can be directed r 302-545-6011.	

Name: