 Masters Swimming WA

TECHNICAL OFFICIATING COURSE REGISTRATION FORM

**Date: Saturday 3rd September, 2016 - 12:30 pm – 4:45pm**

**Venue: Club Room**

**Beatty Park Leisure Centre**

**220 Vincent Street, North Perth**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MISSION:**

To promote a professional approach to identification, training and ongoing development of technical officials at all levels of swimming, conducted under National Masters Australia Swimming Rules and guidelines.

**AIMS:**

To cater for the needs of Masters Swimming WA through a volunteer program and team of people who perform duties in all aspects of officiating at all levels.

**COURSES OFFERED:**

|  |  |
| --- | --- |
| 1. **Inspector of Turns** | **12:30 pm to 2:15 pm** |
| 1. **Judge of Strokes** | **2:15 pm to 4:00 pm** |
| 1. **Starter** | **4:00 pm to 4:45 pm** |

**VENUE**: Club Rooms, Beatty Park Leisure Centre, 220 Vincent St, North Perth

**COURSE FEE:** FREE

**ENROLMENT:** Please complete the enrolment form below and return by midnight, **Friday 26th August, 2016**

by email: duncan1320@bigpond.com

or ring Lynne Duncan on 9293 3041 or mob. 0417 997 556

***Please note:***

• Officiating Courses are subject to minimum and maximum numbers.

Early response will avoid disappointment.

Refreshments (Tea & Coffee) will be available. You are welcome to bring your lunch with you, if you wish to.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application for Officiating Courses –IOT, JOS, Starter - Saturday 3rd September2016, 12:30pm 4:45pm**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | | | | | | | |
| **Address** |  | | | | | | | | **Postcode** | |  |
| **Date of Birth** |  | | **Phone #** | | |  | | | | | |
| **Email** |  | | | | | | | | | | |
| **Club** |  | **Technical #** | | |  | | **MSWA Member #** | | |  | |
| **Nominate Courses** | **Inspector of Turns** Y/N | | | **Judge of Stroke** Y/N | | | | **Starter**  Y/N | | | |