

APPLICATION FOR TECHNICAL CONTROLLER

1251 Holy Cow Road, Polk City, Florida 33868-8200 Phone: (800) 533-2972 / (863) 324-4341 ★ Fax: (863) 325-8259 ★ E-mail: competition@usawaterski.org

| Check Events Applying For: | SLALOM | TRICKS | JUMPING | | | | | |
|--|---|--|--|--|--|--|--|--|
| Name | USA Water Ski Membership # | | | | | | | |
| Address | | | Age (min. 1 | 15) | Gender | | | |
| City | | State | | Zip Code _ | | | | |
| Area Code/Telephone (day) | | (evening) | | | | | | |
| Fax Number | Number E-mail Address | | | | | | | |
| Quantitative Requirements: To attain a Complete an Application for Technica Attend a Technical Controller clinic; a Satisfactorily complete both a written or at a Technical Controller clinic. | al Controller; and | ů | ther as part o | f a Record | Capability site pre-survey | | | |
| Maintenance Requirements: Work two counts for renewal for 2005) and attend one Te | tournaments bi-annu echnical Controller cli | ally (i.e., work performed and only every four (4) years. | lanuary 1, 200 | 3 through | December 31, 2004 | | | |
| Application Instructions: The following s at three (3) record capability tournaments, one applicable blanks must be completed and signed completed for each event for which you are mall tournaments unless otherwise noted. Signatures is attached to this application. Be sure to contact well in advance of the scheduled tournament data | e of which must b by the Chief Technica king application. All of s on outdated applicat t the Chief Technical | ne a Regional, National Controller and Chief Jud for the work must be performations will be accepted for the Controller of the record of the r | al or US Tedge of the tour med during Us requirements capability tour | eam Tria rnament in SA Water: on the curi | Is Tournament. The which the experience was Ski-sanctioned AWSA rent form if the old form u are planning to attend | | | |
| Once you have completed this application for the Technical Controller Clinic or a Record Capabi regarding pre-approved clinics and testing sites. | ility site pre-survey. Yo | ou must contact your Regi | onal Technica | al Committe | ee representative | | | |
| At the clinic or site pre-survey, you will be giver Technical Controller's rating by the Instructor/I Evaluation form, to USA Water Ski Headquarte once your rating is approved. You should contin | Examiner who will in ers. If you are filing for | turn forward this form, ale a one or two-event rating | ong with a Cli g, your origina | inic Registra al applicatio | ation or Official's | | | |
| Attention Chief Judges and Technical controllers' qualifications unless you assume the | Controllers: Please responsibility of refu | se be discriminating. AWS. using to approve any but ex | A cannot maii xceptionally q | ntain a high ualified app | standard of technical olicants. | | | |
| Attend a USA Water Ski-sanction | ed AWSA Techn | ical Controller Clini | c | | | | | |
| Clinic Date | Clinic Date Location (City/State) | | | | | | | |
| Instructor's Printed Name | Signature | | | | | | | |
| Technical Report Preparation and | l Record Form Fa | amiliarity/Preparatio | n | | | | | |
| Technical Report Preparation and Tournament Name | Date | Chief Tech. Controller's | s Signature | Chi | ef Judge's Signature | | | |

2.

3. *

^{*} Must be performed at a Regional, National or US Team Trials Tournament.

| A. Course Survey and Verification B. Buoy Measurement and Verification | | | D. Video System Verification E. Towline Measurement and Verification | | | |
|---|---|---------------------|---|---|--|--|
| | | | | | | |
| M | Tournament Name | Date | Chief Tech. Controller's Signature | Chief Judge's Signature | | |
| SLALOM | 1. | | | | | |
| S | 2. | | | | | |
| | 2. | | | | | |
| | 3. * | | | | | |
| | | | | | | |
| | A. Course and Buoy Measurement | | C. Video System Verificatio | n | | |
| | B. Timing System Verification | | D. Judging Tower Verification | | | |
| | Tournament Name | Date | Chief Tech. Controller's Signature | Chief Judge's Signature | | |
| TRICKS | 1. | | | | | |
| H H | 2. | | | | | |
| | 2. | | | | | |
| | 3. * | | | | | |
| | | | | | | |
| A. Course Survey and Varification | | | D. Timing System Verification | | | |
| | A. Course Survey and VerificationB. Buoy Measurement and VerificationC. Ramp Measurement and Verification | | E. Meter System & Plotting Board/Computer Verification F. Towline Measurement and Verification | | | |
| | | | | | | |
| ŋ | | Data | I | | | |
| JUMPING | Tournament Name 1. | Date | Chief Tech. Controller's Signature | Chief Judge's Signature | | |
| 2 | | | | | | |
| | 2. | | | | | |
| | 3. * | | | | | |
| | | | | | | |
| * 1\ | lust be performed at a Regional, Nationa | l or US Tea | m Trials Tournament | | | |
| | last 20 por formed at a regional, reactions | . 0. 00 . 00 | | | | |
| Hai | ring completed all of the required above listed work satisfa | actorily (as certif | ied by the Chief Technical Controller and Ch | hief Judge), I hereby apply for the written and | | |
| | ctical testing as required to become a Technical Controller | | • | | | |
| | Slalom | 7 | ricksJumping | | | |
| Siar | nature | | Nate. | | | |
| луI | iutui 0 | | Date | | | |
| | | | | | | |