

Your name _____

Your email address _____

Clinic	Clinic Provided By	Date	Deck Evaluation by or Name of the Meet	Date
Safety Marshal				
Timekeeper				
Clerk of Course				
Chief Timekeeper				
Chief Finish Judge				
Chief Judge Electronics				
Desk Control (Recorder/Scorer)				
Stroke Judge				
Turn Judge				
Starter				
Meet Manager				
Clinic given				