



WISCONSIN SWIMMING

Official Apprentice Card

Appr. Name: _____

Apprentice Position: S&T CJ Admin
(S&T : 4 sessions, CJ : 2 sessions, Admin : L1 : 2, L2 : 3 sessions)

Please mail or email a completed copy of this card to:
Jacky Jugenheimer, Officials Chair
459 Presidential Ln
Madison, WI 53711
officialschair@wisconsinswimming.org



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Apprentice Position: Starter Referee
(Starter: 5 apprentice session, incl. distance session and Referee: 6 apprentice sessions)

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Please enter Date, Position and Signature. For Starter indicate a distance session)
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Please enter Date, Position, Name of Meet and Signature. For AO please indicate if Timed Finals, Prelim or Finals session.
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