



WISCONSIN SWIMMING

OFFICIALS SIGN-IN SHEET

Meet:	Session:	Date:
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Name (print)	Name (sign)	Cert. Level	Position Worked	Club Affiliation (print)	Date of Expiration on USA Card

Please see this information is entered into the OTS file and send a copy of this sheet(s) to the Officials Chair:
 By signing this sheet, I certify that I am a current Official member of USA Swimming and have satisfactorily completed criminal background check and athlete protection education, as required by USA Swimming.

OTS Certification Level Codes:

ST – Stroke and Turn; XJ if training in the position	DR – Deck Referee, XR if training in the position
CJ – Chief Judge	MR – Meet Referee
SR – Starter, XS if training in the position	AO – Admin Official, YA if training in the position