



**Referee Request for Montana State Championship Meets**

To: Montana Swimming

Meet: \_\_\_\_\_

Meet Dates: \_\_\_\_\_

Meet Location: \_\_\_\_\_ ,

LSC: MT

Mail to: Lon Huckert, 150 Sheridan Ave, Bozeman, MT 59718 or email to [lonhuckert@gmail.com](mailto:lonhuckert@gmail.com) or phone 406-581-0458.

**Please consider me for assignments as Meet Referee at the above meet:**

Name: \_\_\_\_\_ LSC: \_\_\_\_\_ USA S Reg # \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_



Polo Shirt Size: \_\_\_\_\_

Level

**LSC**

Years•months

(Choose each position)

Level

<b>Current Certifications:</b>	<b>Stroke &amp; Turn Judge:</b>	<input type="checkbox"/>
	<b>Chief Judge:</b>	<input type="checkbox"/>
	<b>Starter:</b>	<input type="checkbox"/>
	<b>Deck Referee:</b>	<input type="checkbox"/>
	<b>Administrative Referee:</b>	<input type="checkbox"/>
	<b>Meet Referee:</b>	<input type="checkbox"/>

Your Request:  sorry, were not selected.

Selected for the following position -

Ref,

Ad Ref

\_\_\_\_\_, Montana Swimming. Date: \_\_\_\_\_

Send "Confirmation"/"Sorry" to applicant.