



**KENTUCKY SWIMMING, INC.
OFFICIALS' MEET SIGN-IN SHEET**

MEET NAME _____ **LOCATION** _____

SESSION NO _____ **DAY** _____ **DATE** _____

Stroke Briefing Presenter _____

POSITION	(Please PRINT) NAME	CLUB	ASSIGNMENTS			SIGNATURE
			Deck	Relay	Mentor	
Meet Referee						
Admin Official						
Referee						
Referee						
Starter						
Starter						
Chief Judge						
Chief Judge						
Chief Judge						
S & T 1						
S & T 2						
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S & T 16						
S & T 17						
S & T 18						
S & T 19						
S & T 20						
Timing Judge						
Timing Judge						

Please Note: A separate form should be completed for EACH session of the meet. It is the Meet Referee's responsibility to submit this form to the Officials' Chair. Officials will NOT receive credit for the session until the form is submitted.

SEND TO: **Becky Gilpatrick**
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