

APPLICATION FOR LEVEL 3 (H3) (NATIONAL/REGULAR) TECHNICAL CONTROLLER

Revised 1/2024

	Phone: (863) 324-43	41 * Fax: (863) 325-8259 *	E-mail: officials@usawaterski.org	
Check Event(s) Applying For:	☐ SLALOM	☐ TRICKS	☐ JUMP	
Name		USA Water Ski Membership #		
Address			Age (Min. age 21)	
City		State	Zip Code	
Area Code/Telephone (day)		E-mail Address _		
Application Instructions:				
 Water Ski-sanctioned AWSA record National, or Major tournament on out-dated applications will be accompleted at a minimum an Assistant Jud Once completed, submit the application approval. Go to http://www.usawatemembers. It is suggested that you revent, use your copy of the application A written test may be administered fully passing the testing, the AWSA Theadquarters for processing. 	d capability tournant with prior appresented for requirer ge's Rating in one tion to AWSA's Transki.org/pages/divitain a copy of this on to continue to by the TC Committee Ch	ments (one of which mustroval), for each event for whents on the current form it of the event (slalom/jump/trown) (Slalom/jump/trown) (Committee Chair and USsions/3event/AWSACommiapplication for your record obtain signatures and receivatee Chair once all requiremair will approve/sign the approximation to the sign to the sign that the sign than the si	which you are making application. Signatures f the old form is attached to this application. ricks) (2019) SA Water Ski's Officials' Coordinator for ittees.pdf for a listing of current commit-tee ls. If you are continuing to work on another we credit for the other event(s). The nents have been completed. Upon successibilication and submit to USA Water Ski	
CLINIC ATTENDANCE: Attend a U				
Clinic Date L				
Instructor's Printed Name				
Instructor's Signature				
Attention Chief Judges and Technical nical controllers' qualifications unless you a perform and demonstrate that he/she can	assume the respon	sibility of approving only qu	SA cannot maintain a high standard of techalified applicants. The individual must	
GENERAL				
	Date	Chief Senior Technical Con	ntroller's	

port and be familiar with Record Form preparation: 1. 2.

Signature

mm/dd/yy

Chief Judge's Signature

Tournament Name

Setup and verify site, prepare Technical Re-

*3.

^{*}Must be performed at an AWSA Regional, National or U.S. Team Trials tournament

SLALOM EVENT				
	Date	Chief (Senior)		
Tournament Name	mm/dd/yy	Technical Controller's Signature	Chief Judge's Signature	
A. Course Survey and Verification		D. Video System Verification		
B. Buoy Measurement and Verification		E. Towline Measurement and Verification		
C. Timing System Verification		F. Judging Tower Verification		
I.				
2.				
[*] 3.				
RICKS EVENT				
	Date	Chief (Senior)		
Tournament Name	mm/dd/yy	Technical Controller's Signature	Chief Judge's Signature	
A. Course and Buoy Measurement		C. Video System Verification		
B. Timing System Verification		D. Judging Tower Verification		
I.				
2.				
*3.				
UMP EVENT	Date	Chief (Senior)		
Tournament Name	mm/dd/yy	Technical Controller's Signature	Chief Judge's Signature	
A. Course Survey and Verification		D. Timing System Verification		
B. Buoy Measurement and Verification		E. Meter System and Plotting Board/Computer Verification		
C. Ramp Measurement and Verification		F. Towline Measurement and Verific	cation	
1.				
2.				
*3.				
Must be performed at an AWSA Region	nal, National or	· U.S. Team Trials tournament		
Judge Rating:		Verified By:		
(Minimum -Assistant Judge's Rating in one of th	ne events (slalom/ju	ump/tricks)		
Regular TC Testing: Date Completed _	Score	Verified By		
pproval of this application authorizes this ind ssistant to the Chief Technical Controller at C			Class C or E tournaments or serve	
APPROVED BY AWSA TECHNICAL	. COMMITTEE	E CHAIR:		
ignature	re Date			
<u> </u>				