
Major Officials:

Chief of Competition

Rating: _____

Name: _____

Has he/she been contacted and agreed to serve? Yes No

Chief Boat Driver

Rating: _____

Name: _____

Has he/she been contacted and agreed to serve? Yes No

Chief Calculator

Rating: _____

Name: _____

Has he/she been contacted and agreed to serve? Yes No

Technical Controller

Rating: _____

Name: _____

Has he/she been contacted and agreed to serve? Yes No

Safety Director

Name: _____

Address: _____

Qualifications: _____

Rating: _____

Has he/she been contacted and agreed to serve? Yes No

Other Officials:

Name _____

Position _____

Name _____

Position _____

Technical:

Boat(s) to be used:

1. Manufacturer: _____

Model: _____ Year: _____

2. Manufacturer: _____

Model: _____ Year: _____

Proposed Method of Speed Control _____

Proposed Method of Scoring

Manual _____

Computer _____

Ski Score _____

Other _____

Proposed Method of Timing

(excluding wakeboard tournaments)

Slalom

stopwatch _____

automatic _____

Jump

stopwatch _____

automatic _____

Tricks

stopwatch _____

automatic _____

Are there any rule deviations proposed? Yes No

If YES, attach explanation of proposed deviation and rationale.

3. INSURANCE

Does the host organization currently hold WSWC insurance? Yes No

If yes, please indicate date paid to WSWC: _____

If no, please state insurance company, and policy number, below:

Provincial endorsement: _____

(Signature of provincial association representative)

