ARIZONA SWIMMING
Meet Operations Personnel Sanction

Meet:_____Date:_____Session:_____

ONE FORM PER MEET IS REQUIRED **PLEASE PRINT YOUR INFORMATION**

Sessions Available

Clerk of Course		Other Personnel
Equipment Operator		
HyTek (Data) Operator		
Meet Review Committee		
Meet Director		
Meet Referee		
Coach		
Athlete		
Other USA Swimming Member		
Meet Marshals (List expiration date, please)		

Submitted By: _____ **Date:** _____

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