

# Safety Clinic Sanction Request Form



Complete this form and return it to the Competition Coordinator at USA Water Ski HQ. USA Water Ski HQ must receive this form no later than 7 days prior to the beginning day of the clinic.

**USA Water Ski Headquarters ★ Attention: Competition Coordinator**  
**1251 Holy Cow Road ★ Polk City, FL 33868-8200**  
**Phone (863) 324-4341 ★ Fax (863) 325-8259 ★ competition@usawaterski.org**

Application Submission Date: \_\_\_\_\_ **Sport Discipline:**  AWSA  NSSA  ABC  
Clinic Date(s): \_\_\_\_\_  NCWSA  AKA  WSDA  NWSRA  
Clinic Site: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Host Club: \_\_\_\_\_ Club Number: \_\_\_\_\_

## Clinic Contact

It is the responsibility of the clinic contact to locate and secure a qualified course conductor and an adequate site for on-water instruction and examination. The clinic contact also must notify his region's Executive Vice President and National Safety Committee representative of the clinic dates and location. In addition, the clinic host is required to print all clinic materials for each participant of the clinic once the safety clinic has been sanctioned; including the appropriate rulebook per sport discipline.

Name: \_\_\_\_\_ Membership#: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Night Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## Course Conductor

Name: \_\_\_\_\_ Rating: \_\_\_\_\_ Membership#: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Night Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## Education Materials

Clinic materials will be e-mailed to the clinic host prior to the clinic date(s). The clinic host is required to print all clinic materials for each participant of the clinic once the safety clinic has been sanctioned. The clinic host is responsible for forwarding clinic results and all fees collected to USA Water Ski Headquarters. All participants must be active USA Water Ski members and pay a \$10 clinic fee. There is not a clinic fee for the clinic instructor(s). Please indicate the e-mail address you would like the clinic materials sent to:

E-Mail: \_\_\_\_\_ Attention: \_\_\_\_\_