

Trained Driver Clinic Sanction Request Form



Complete this form and fax, e-mail or mail it to USA Water Ski's Officials' Coordinator no later than seven (7) days prior to the beginning day of the clinic.

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

Clinic Date(s) _____

Clinic Site _____ City _____ State _____

USA Water Ski-Affiliated Club _____ Member # _____

CLINIC CONTACT

It is the responsibility of the clinic contact to locate and secure a qualified clinic instructor and an adequate site for the classroom and on-water practical instruction and evaluation.

Name _____ Member # _____

Area Code/Phone _____ E-mail _____

CLINIC INSTRUCTOR

Sport discipline-rated Regular (Class B) or Senior (Class C) Drivers are eligible to serve as instructors for the Trained Driver Program.

Name _____ Rating _____ Member # _____

Area Code/Phone _____ E-mail _____

CLINIC MATERIALS

Clinic materials will be e-mailed to the clinic instructor unless specifically requested by the instructor to e-mail the materials to the clinic contact. Please print and have available one packet per student.

Instructor's E-mail Address _____

The clinic instructor is responsible for forwarding clinic results and all fees collected to USA Water Ski's Officials' Coordinator. All participants must be current "Active" members of USA Water Ski and pay a \$10 clinic fee. There is no fee for the clinic instructor.