***Wisconsin Swimming presents …***

# *OFFICIALS TRAINING CLINIC: Starter/Referee*
# *In conjunction with YMCA Level 2 Clinic!*

Date: ***November 19, 2011 (Saturday)***
Location: YMCA, 3303 West 20th Avenue, Oshkosh, WI 54904
Time: Check-in: 12:45 PM; Clinic: 1:00 - 5:00 PM
Trainers: Michael Patton, Wisconsin Swimming Officials Committee Member
Linda Klope, YMCA Officials Trainer

***Fee:*** Pre-Registration is appreciated greatly to insure sufficient Clinic materials.
*USA Swimming*: $25; (Clubs usually pay or reimburse participants for this fee.)
*YMCA:* $35; (Check with YMCA about reimbursement.)
If a participant is training for both USA Swimming and YMCA certifications, the participant must pay both registration fees.

***Payment is due before participation in the clinic.***

***Prior to the Clinic:***
Receive brief pre-clinic reading via e-mail.

***At the Clinic:*** Participants will observe swimmers competing and Officials' deck jurisdictions during the OSHY conducted Meet. In addition, participants view a USA Swimming DVD. Trainers explain tests and the Apprenticeship for USA Swimming. Please bring paper and pen for note taking. Beverages and snacks are provided.

***After the Clinic:***
*USA Swimming Participants:* Take the USA Swimming on-line, open book tests and complete apprentice sessions on deck.
*YMCA Participants*: Take the YMCA Swimming on-line, open book tests.

***Questions????*** Please contact Michael Patton, mcseclp@yahoo.com, or at 920.410.5850.

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**Registration: Starter/Referee Clinic: Oshkosh: November 19, 2011 (Saturday)**

Registration Certification as Starter-Referee/Level 2 for *(circle one or both)*: USAS YMCA

*USA Swimming:* Make check in the amount of $25 and payable to Wisconsin Swimming, Inc.
*YMCA:* Make check payable in the amount of $35 and payable to Linda Klope

Please complete registration, attach check(s), and mail, ***not later than November 9, 2011, Wednesday***, to:
Michael Patton, 2510 Hamilton Street, Oshkosh, Wisconsin 54901.

Name _____ USAS Club _____ Y_____

Address _____
Street City ZIP

Telephone (_____) _____ e-mail _____