



**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: \_\_\_\_\_

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)

