



NAME				SEASON			
RACE DATES	NAME & LOCATION OF RACE	NO. DAYS	DH SG GS SL	ASSIGNMENT	SIGNATURE TD CR TC		

Enter each race participated in on the above chart. Return to:

Tom Ptach
Tom@MyBrokers.com

PRINTOUT OF USSA HISTORY IS NOT ACCEPTABLE. USE THIS FORM TO RECEIVE CREDIT FOR DAYS WORKED

This information is necessary for updating and validation for the next season. It is necessary to remain active in officiating to maintain your certification.

Please indicate any changes:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

E-MAIL: _____

CLUB AFFILIATION: _____