

NOMINATION OF NEW ISI JUNIOR ATHLETE REPRESENTATIVE

A new ISI Junior Athlete Representative is to be elected at the Senior Short Course Championships. All athletes interested in this position should complete the form at the bottom of this page. They must also include a brief paragraph on a separate sheet of paper stating why they want to be the Junior Representative. Mail the form and attached paragraph by Wednesday before the meet to the Iowa Swimming Office.

The position of Junior Representative requires a two-year commitment from the athlete. The athlete serves as Junior Representative for the first year of their term and becomes Senior Representative for the second year. The responsibilities are to attend House of Delegates Meetings, ISI Board Meetings, and share opinions and advise on issues that are of concern to the swimmers of Iowa. Also possibility of attending the Fall USA Swimming National Convention.

A swimmer wishing to be nominated must

- (a) be an Athlete Member or a Seasonal Athlete Member in good standing
- (b) be sixteen (16) years of age or at least a sophomore in high school
- (c) be currently competing, or have competed during the three (3) preceding years in the program of swimming conducted by ISI or another LSC
- (d) reside in the Territory and expect to reside therein throughout at least the first half of the term.

The nominee does not have to be present at the Long Course Championship meet to be elected.

Voting will take place during the prelims session on Sunday of the Championship meet. The name of the new Junior Representative will be announced that evening before the start of the finals session. All athletes in good standing who are present and thirteen years of age or older are encouraged to vote. Ballots should be completed before the end of the morning session and placed in the election box at the designated location.

Current representatives can be found on the ISI website under Board of Directors.

Detach & attach to typed paragraph

NAME: _____ AGE: _____ SWIM CLUB: _____

ADDRESS: _____ CITY: _____

PHONE: (____) - _____ - _____ EMAIL: _____

Signature of Athlete

Signature of Parent or Guardian