



**U.S. MASTERS
SWIMMING**
OPEN WATER

Open Water Service Award Nomination

DATE OF SUBMISSION: _____

NOMINEE Contact Info:

Nominee Name: <i>(First, Last)</i>	
Email:	
Phone Number 1: <i>(Cell)</i>	
Phone Number 2: <i>(Home)</i>	
USMS Permanent ID: <i>(if known)</i>	
USMS Club / Workout Group:	
LMSC:	
USMS Zone:	

NOMINATOR Contact Info:

Nominee Name: <i>(First, Last)</i>	
Email:	
Phone Number 1: <i>(Cell)</i>	
Phone Number 2: <i>(Home)</i>	
USMS Permanent ID:	
USMS Club / Workout Group:	
LMSC:	
USMS Zone:	

Please include a resume or listing of Nominee's significant service contributions to promoting and building excellence in USMS open water swimming. Areas to consider;

- Promotion of the USMS mission, vision, goals, and objectives through open water swimming service.
- Service and contributions: USMS national committees, LMSC open water/long distance chair, event and/or safety director, official, coach, clinician, and/or volunteer.
- Demonstration of extraordinary measurable service achievement and impact.

Submit nomination **NO LATER THAN JULY 1** via email to:

Bob Bruce

coachbobbruce@gmail.com