

ESA All-Star Team Member & Mentor Application



Please specify that you are applying to be a Team (circle one)

MEMBER (age 14-17)

JR. MEMBER (age 10-13)

MENTOR (over 18 yrs old)

Personal Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Date of Birth	
E-Mail Address	

ESA District & Regional Information

ESA local district	
Number of years you have been surfing with the ESA	
ESA divisions that you currently surf (2017 season)	
District ranking 2016 & 2017	
Regional placings 2016 & 2017	
Easterns® placings 2016 & 2017	
Other surfing organization memberships (if any)	

References

Please list three references who we may contact regarding your application for the ESA All-Star Team. These can include (but not limited to) employers, teachers, ESA directors, sponsors, competitors, etc.

REFERENCE #1	
Name	
Phone and email address	
Relationship	
REFERENCE #2	
Name	
Phone and email address	
Relationship	
REFERENCE #3	
Name	
Phone and email address	
Relationship	

Special Skills or Qualifications

Summarize your special skills, volunteer work and other activities, including hobbies or sports. What interests you other than surfing?

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A letter to the All-Star Team Committee discussing why you want to be a part of the ESA All-Star Team MUST be attached to this application or you will not be considered.

Parent or Guardian Information (MUST BE COMPLETED)

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as an ESA All-Star Team Member, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal from the Team.

Name (printed)	
Signature	
Date	
Parent/Guardian Name	
Parent/Guardian Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Please contact allstars@surfesa.org with any questions about completing this form.

Submit completed applications to allstars@surfesa.org, and a copy to your local ESA district director, no later than **November 1, 2017** for consideration for the 2018 ESA All-Star Team.