

## SKYDIVE CITY ZHILLS LOAD ORGANIZER APPLICATION

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Cell/text phone: \_\_\_\_\_ email: \_\_\_\_\_  
Facebook and other Social Media Pages: \_\_\_\_\_

### Basic Information

# Jumps: \_\_\_\_\_  
When did you make your first jump? \_\_\_\_\_  
Where did you make your first jump? \_\_\_\_\_  
DZ where you learned to jump? \_\_\_\_\_  
Nationality: \_\_\_\_\_

USPA and other Licenses and Ratings: \_\_\_\_\_

Records: \_\_\_\_\_

Competition History: \_\_\_\_\_

Other Accomplishments: \_\_\_\_\_

Gear: \_\_\_\_\_  
Main: \_\_\_\_\_ Reserve: \_\_\_\_\_  
Container: \_\_\_\_\_ Suit: \_\_\_\_\_  
How many rigs do you have? \_\_\_\_\_

Wind Tunnel time: \_\_\_\_\_

What sponsorships do you have or have had? \_\_\_\_\_

If you seek a Skydive City team training sponsorship, tell us about your team and how they compete? \_\_\_\_\_

When are you hoping to ORGANIZE at Skydive City? [days of week, season] \_\_\_\_\_

## Organizing Information

What disciplines would you like to organize? [Check all that apply.]

WS  FF  Angle  Tracking  CF  CP  Other

FS, indicate preference, if any:  4-way  8-way  10-way  16-way  Large  Other

Do you certify that you have read the Competition Manual section for the disciplines you wish to organize?

Comment on your skydiving history (or provide your skydiving resume):

Describe Load Organizing you've done previously:

What is your Load Organizing philosophy?

Why would you make a good Load Organizer at Skydive City?

References: Who should we call or email who would recommend you?

Tell us about you personally, including other skills and experiences.

Contact us at: [info@skydivecity.com](mailto:info@skydivecity.com) [or [susan@skydivecity.com](mailto:susan@skydivecity.com)] or 813-783-9399 with questions or comments. Or message us on our Facebook page: Skydive City. You may submit a resume or anything else and these emails.