



SANCTIONED MEET - APPLICATION FORM

CONTACT DETAILS

Organisation

Meet Director Name

Mailing Address

Tel Number

Email

COMPETITION DETAILS

Meet Type: Pool Event Open Water Event

Meet Category: Level 1 (International) Level 2 (Domestic) Level 3 (Club)

Meet Name:

Meet Venue:

Meet Date(s): Start Date End Date

Session Times: Warm-Up Start Approx Finish

Are these times applicable each day of the meet? Yes No

If NO please specify (*complete details overleaf if necessary*):

Meet Type: Open Invitational

If Invitational please indicate invitees:

Age Eligibility:



CAYMAN ISLANDS AMATEUR SWIMMING ASSOCIATION

TECHNICAL DETAILS (Pool)

Pool Configuration: Length Number of Lanes

Pool Depth Shallow End Deep End

Starting Blocks: Make/Model One End Both Ends

Lane Ropes: Anti-Turbulence? Yes No

TECHNICAL DETAILS (Pool & Open Water)

Timing System: Electronic Manual Acoustic Start: Yes No

Scoreboard: Yes No

Meet Software:

Electronic Results Service: Yes No

OTHER

Spectator Seating (Number) Competitor Seating (Number)

Qualified First Aid Yes No

Public Address System: Yes No

Please use this space to add any further information to support this application

ORGANISATION/CLUB REPRESENTATIVE SIGNATURE

I CONFIRM THAT THE ABOVE COMPETITION WILL BE CONDUCTED IN ACCORDANCE WITH THE CIASA SANCTIONED MEET RULES AND MINIMUM REQUIREMENTS AS SPECIFIED IN THE [CIASA SANCTIONED MEETS - INFORMATION & REQUIREMENTS](#) DOCUMENT.

NAME:

SIGNATURE:

DATE:

PLEASE RETURN THIS FORM WITH THE MEET CONDITIONS & EVENTS SCHEDULE TO:
CIASA, PO Box 10376, Grand Cayman KY1-1004 OR EMAIL ciasaboard@gmail.com