# AMS MEET BID APPLICATION

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| --- | --- | --- | --- |
| General Information | | Venue Description | |
| Club Name |  | # Lanes |  |
| Meet(s) Location |  | Warm-Down Pool? (Y/N) |  |
| Short OR Long Course |  | Spectator Seating Capacity |  |
| Indoor/Outdoor |  | Available Parking Spaces |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Key Personnel | | | |
| Meet Director |  | Experience |  |
| Entry Chair |  | Experience |  |
| Computer Operator |  | Experience |  |
| Timing Console Operator |  | Experience |  |
| Type of Timing Equipment |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| List the last four AMS meets your club has hosted. | | | |
| 1. |  | 3. |  |
| 2. |  | 4. |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Club’s Officials / Certification Levels | | | | | |
| *Name* | | *Level* | *Name* | | *Level* |
| 1. |  |  | 6. |  |  |
| 2. |  |  | 7. |  |  |
| 3. |  |  | 8. |  |  |

Does your club have a current Hazard Identification & Risk Analysis Checklist on file with AMS?  Yes  No

Will someone be available to cover First Aid situations throughout the entire meet?  Yes  No

Will Meet Marshals available to keep the deck clear of non-meet personnel during the competition?  Yes  No

Does your pool have a separate resting/eating area(s) for swimmers?  Yes  No

If yes – please describe the area(s) and relative location(s) to the pool:

Will there be event notification for swimmers available in the resting area?  Yes  No

Are there other events scheduled at your facility for the same dates that you are bidding on?  Yes  No

Comments (optional) – please attach additional comments or relevant information:

AMS SC Meet Bid Application (continued)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| MEET REQUESTS | | | | | |
| **Please note the following requirement:**  If you are bidding to host just one (1) meet, you must bid on at least two (2) different meets,  If you are bidding to host two (2) meets, you must bid on at least four (4) different meets,  If you are bidding to host three (3) meets, you must bid on at least six (6) different meets.  *The intent is to award as many 1st requests as possible, but 1st requests cannot be guaranteed.* | | | | | |
| The number of meets your club would like to host –     . | | | | | |
| ***Meet Name*** | | ***Dates*** | ***Meet Name*** | | ***Dates*** |
| 1st |  |  | 4th |  |  |
| 2nd |  |  | 5th |  |  |
| 3rd |  |  | 6th |  |  |

Special notes regarding your meet request(s):

This application is for the following meet type:

Sanctioned  Approved  Other, please specify:

WE, the undersigned understand and agree that the submitting of this application does not constitute a guarantee that our club will be awarded a meet.

WE also understand that should we be awarded a meet, we agree to abide by the Rules and Regulations of USA Swimming, Inc. and Allegheny Mountain Swimming, Inc. These terms specifically include those set forth in Article 202 of the current USA Swimming Rules and Regulations and Parts Two and Three of the Operating Procedures of Allegheny Mountain Swimming, Inc.

Upon notification and acknowledgement of the meet(s) awarded, we have seven (7) days to submit the **MEET ANNOUNCEMENT** and **APPLICATION FOR SANCTION** to the **SANCTIONS CHAIR** via e-mail or per the instructions that are stated on the appropriate forms.

In addition, a completed Meet Summary Form will be sent to the AMS Office with the applicable fees within 10 days following the meet. The Meet Director will also complete a self-evaluation form and forward to the Age Group Chair or the AMS Age Group Representative within 10 days following the meet. (Please see the AMS website for current AMS Office and Age Group Chair or Age Group Representative’s contact information.

**WE ALSO AGREE AND UNDERSTAND THAT THE OUTCOME OF THE AWARDING OF THE MEETS IS FINAL.**

We have completed the above information and acknowledge that we have read and understand the above statement in regard to the awarding of meets.

Club President:  Date:

Meet Director:  Date:  ­