Alaska Swimming

Championship Meet Evaluation

Meet:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dates:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form will be used to assist future hosts, officials and Alaska Swimming in general to improve competition for our athletes. Please complete and deposit with your coach, by the announcers table or at box near concessions.

This form can also be submitted to the meet hosts via email. Please check invite for the correct email information.

1. **Pre-planning 1(Low) 2 3 4(High)**

Invite ( ) ( ) ( ) ( )

Ease of travel ( ) ( ) ( ) ( )

Order of Events ( ) ( ) ( ) ( )

Suggestions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Facilities/ general**

Parking ( ) ( ) ( ) ( )

Concessions ( ) ( ) ( ) ( )

Restrooms ( ) ( ) ( ) ( )

Swimmer’s Deck Area ( ) ( ) ( ) ( )

Public Address System ( ) ( ) ( ) ( )

Spectator Seating ( ) ( ) ( ) ( )

Warm-up/down ( ) ( ) ( ) ( )

Suggestions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Facilities/Competition Pool**

Lighting ( ) ( ) ( ) ( )

Ventilation ( ) ( ) ( ) ( )

Deck Space ( ) ( ) ( ) ( )

Cleanliness of Restrooms ( ) ( ) ( ) ( )

Suggestions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Officials**

Meet Director ( ) ( ) ( ) ( )

Meet Referee ( ) ( ) ( ) ( )

Deck Referee ( ) ( ) ( ) ( )

Starter(s) ( ) ( ) ( ) ( )

Stroke & Turn ( ) ( ) ( ) ( )

Computer Personnel ( ) ( ) ( ) ( )

Announcer ( ) ( ) ( ) ( )

Suggestions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **General Appraisal**

Hospitality ( ) ( ) ( ) ( )

Awards ( ) ( ) ( ) ( )

Safety ( ) ( ) ( ) ( )

Security ( ) ( ) ( ) ( )

Overall Flow ( ) ( ) ( ) ( )

Please use the back of this sheet for any additional comments. Contact info is optional.

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Information:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What was your position at this meet: ( ) Coach ( ) Official ( ) Volunteer ( ) Parent ( ) Spectator