

USA Swimming  
Alaska Swimming, Inc.  
Request for Sanction  
ASI swim season - 2021-22  
**COMPLETE BOTH SIDES OF THIS FORM**

**Sanction Fee: \$20**

**Blanket Sanction: \$50**

**Late Fee(within 60 days of meet): \$50**

Date: \_\_\_\_\_

I, \_\_\_\_\_, apply on behalf of \_\_\_\_\_

*Applicant Name*

*Organization (Club)*

For a Sanction/Approval to hold a swimming competition, exhibition or clinic titled:

\_\_\_\_\_

at \_\_\_\_\_ on the \_\_\_\_\_ day(s) of \_\_\_\_\_, 20 \_\_\_\_ .  
*Location Date Month Year*

Our Sanction fee of \$ \_\_\_\_\_, a copy of the event information and event entry form are attached.

Also included is a complete schedule of lanes and times for all warm-up procedures which must be adhered to by all participants.

As a condition of obtaining such a sanction, I and the above organization, which I represent, agree to abide by and govern this event under the rules and regulations of USA Swimming, Inc. and Alaska Swimming, Inc., and all other terms and conditions up which this sanction may be granted. These terms specifically include all local rules and regulations and those set forth in Article 202 of the current edition of USA Swimming Rules and Regulations, specific reference to 202.2.8 thereof which provides that

In granting this sanction it is understood and agreed that USA Swimming shall be free from any liabilities or claims for damages arising by reason of injuries to anyone during the conduct of the event.

**Officials:** Officials for this event shall be qualified persons certified by USA Swimming, Inc. and Alaska Swimming, Inc. **Meet Director, Meet Referee, and Admin Official must be listed on back of this form**

Signed: \_\_\_\_\_  
*Club President Date*

Signed: \_\_\_\_\_  
*Club Representative Date*

Return Sanction to: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email **Application** to:  
Susan Oakley, Sanctions Coordinator  
[email to: akswimsanctions@gmail.com](mailto:akswimsanctions@gmail.com)

Mail **Sanction Fee check** to:  
Wendy Kolberg, Treasurer  
17249 Yellowstone Drive  
Eagle River, AK 99577

**Meet Officials:**

Meet Director: \_\_\_\_\_ Email: \_\_\_\_\_  
(must be current non-athlete member of USA Swimming with Level 1 background check and Athlete Protection Training)

Meet Referee: \_\_\_\_\_ Email: \_\_\_\_\_  
(must be current non-athlete member of USA Swimming with Level 2 background check and Athlete Protection Training)

Admin Official: \_\_\_\_\_ Email: \_\_\_\_\_  
(must be current non-athlete member of USA Swimming with Level 2 background check and Athlete Protection Training)

\*\*\*\*\**Applicant Do Not Write Below This Line*\*\*\*\*\*

Approved:  Yes  No

Sanction #: \_\_\_\_\_

Issued: \_\_\_\_\_ 20\_\_\_\_\_

Signed: \_\_\_\_\_