

## **BAHAMAS AQUATICS FEDERATION**

## **MEET INVITATION FORM**

(Complete Parts A, B, C and D and return to BAF accompanied by Events List, Sanction Application Form, Equipment Rental Form, Sanction fee and LCM Pool Rental fees.)

	SANIZATION INFORMATION
HOST CLUB/ORGANIZATION	<b>:</b>
ADDRESS:	
MEET DIRECTOR/CONTACT	PERSON:
E-MAIL ADDRESS:	
TELEPHONE #:	FAX #:
<b>Part B: MEET INFORMATIO</b>	N
Meet Host/Sponsor:	Venue:Maximum # of Individual entries:
Meet Date(s):	Maximum # of Individual entries:
	metre (LCM) Pool [ ]25-metre (SCM) Pool
	[]6-lanes []7-lanes []8-lanes []10-lanes
	Finals only [] Timed Finals, Prelims & Finals
Day 1 – Meet Start Time:	Warm-Up Time:
Day 2 – Meet Start Time:	Warm-Up Time:
Entry Deadline:	Age As Of:idual event \$ per relay team
\$ BAF Surcharge per sw	vimmer \$ other (specify)
Trophies/Awards:	
	nega []Colorado []Daktronics []Other:
Part C: INVITED CLURS/	TEAMS/SWIMMERS INFORMATION
	WIFT, FAC, FSC, YMCA, BSC(edit as necessary)
	(cut us necessary)
Part D: INVITATION TO PA	ARTICIPATE
The above-named Host Club/Org	ganisation hereby extends an invitation to you/your
club/your team to compete in the	above competition sanctioned by The Bahamas Swimming
Federation. Any additional enqui	ries should be directed to the Meet Director or the Contact
Person. A copy of the scheduled I	Programme of Events is attached. Entries should be
	or by e-mail, accompanied by a separate print-out of the
entries.	
Signed by: Meet Director /Head (	Coach /Contact Person Date: