



BAHAMAS AQUATICS FEDERATION NEW CLUB APPLICATION

Club Name: _____

Mailing Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Club Type: ☐ Swimming ☐ Water Polo ☐ Diving ☐ Syncro

Hereby submits application to be recognized as a Club within the Bahamas Aquatics Federation. The names and addresses of the Club's Executive Officers and its BAF Representatives for the period 1st January to 31st December _____ are as follows:-

Names of Club Officers	Position/Office	P. O. Box #	Phone # 1	Phone #2	E-Mail
	President				
	1 st Vice President				
	2 nd Vice President				
	Secretary				
	Assistant Secretary				
	Treasurer				
	Assistant Treasurer				
Names of Club Reps.	Committee	P. O. Box #	Phone # 1	Phone #2	E-Mail
	Council Rep #1				
	Council Rep #2				
	Officials				
	Nationals				
	Finance & Invest.				
	Records & Stats				
	Rules & Regulations				

The Club has _____ Competitors that are registered with the BAF for the current year. The Club confirms that its Officers, Coaches, and its Registered Competitors and their Parents/Guardians will abide by the Rules & Regulations of The Bahamas Aquatics Federation. The Club submits herewith the Club Application Fee of B\$250.00.

X _____
CLUB OFFICER TITLE DATE

FOR INTERNAL USE ONLY

Fee Paid? Yes ☐ No ☐

Paid by: CASH ☐ CHEQUE ☐ MONEY ORDER ☐

For the period 1st January to 31st December _____

Club ID Code: _____

Date Received: _____

Date of Council Meeting: _____

Approved: ☐ YES ☐ NO

X

FOR BAF

BAF Form: #C4.4.1 (Rev. 2009)

THE BSF IS AFFILIATED WITH: FINA – CCCAN – BOA