



## COMPETITION SANCTION REQUEST FORM

BC Artistic Swimming does not require a club to fill out this form to attend National Qualifier, Canadian Artistic Swimming Championships or Canadian Masters Championships. Please refer to the BC Artistic Swimming Technical Package for information on attending those events.

Please return this form to the Director of Sport ([dos@bcartisticswimming.ca](mailto:dos@bcartisticswimming.ca)).

- ❖ Coaches/Clubs are required to submit a request and fill out this Competition Sanction Request Form **prior to** attending an out-of-province competition, exhibition, or demonstration.
- ❖ It is strongly recommended that BCAS approval is granted **prior to** paying registration fees and making travel plans, as there is no guarantee your request will be granted.
- ❖ No sanctioning will be granted when the competition conflicts with any of the following:
  - ❖ a provincial competition, including BC Games;
  - ❖ a relevant national competition, including Canada Games; or
  - ❖ provincial program, BC Games or Team BC training schedules.
- ❖ Please read all of the meet requirements for age, team and event limitations prior to submitting requests and/or registrations fees.
- ❖ Out-of-province sanction applications will be accepted up to 3 months in advance of the requested date(s) or a \$50.00 late fee applies.
- ❖ Clubs that attend an out-of-province event without BC Artistic Swimming approval are subject to a **\$150.00 fine**.
- ❖ The Ignite Provincial Program and Team BC have the first right of refusal for out-of-province and international competitions. BCAS will not sanction a club to attend a competition that an Ignite Provincial Team is attending, however, consideration may be given if the club is participating in different age and event categories.

## COMPETITION SANCTION REQUEST FORM

### Competition Information:

Name of Competition:	
Competition Date(s):	
Competition Location:	
Competition Pool:	
Competition Website:	

### Host Club Information:

Club Name:	
Contact Person:	
Contact Phone:	
Contact Email:	

### Participants Information:

Number of Athletes Attending:	
Age Group of Athletes Attending:	<input type="checkbox"/> 11-12* <input type="checkbox"/> 13-15 <input type="checkbox"/> 16-20 <input type="checkbox"/> Youth <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Masters
Events:	<input type="checkbox"/> Solo <input type="checkbox"/> Duet/Trio <input type="checkbox"/> Team
Stream of Athlete Attending:	<input type="checkbox"/> National <input type="checkbox"/> Provincial
Names of Coaches Attending:	1. 2. 3. 4. 5.
Names of Chaperones Attending:	1. 2. 3. 4. 5.

\*In accordance with the CAS Travel Policy, bids for athletes 12 years of age or younger to compete out of country will be considered on a case by case basis.

Competition/Event	Age Group	Event*	Names of Participating Athlete(s) & Coach(es)
i.e. US Open Masters	i.e. 18-34	i.e. Acro Team	i.e. list <u>all</u> athletes names

*\*Be sure to enter all events your club is requesting a sanction for. If additional space is needed, please send a separate email including all of the information requested in the above table.*

By checking this box, I acknowledge and confirm that all participating athletes, coaches and chaperones are duly registered with BC Artistic Swimming and meet the standards and requirements outlined in the BCAS [Coach Certification Policy](#) and [Volunteer & Screening Policy](#).

**Officials Information:**

Does this competition require your club to provide officials?  Yes  No

If yes:

Number of Officials Required:		Minimum Certification Required:	
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By checking this box, I acknowledge and confirm that all expenses for officials and/or official surcharges will be the responsibility of the applicant [club] and not BC Artistic Swimming.

**Travel & Accommodations:**

Indicate how you will be travelling to the event (i.e. ground, flights, other transportation).	
Indicate how you will be travelling within the destination location (i.e. public transportation, rental van/cars, travel provided by host event, etc.)	
Provide details about where the participants will be staying during the event (i.e. name and address of hotel, rooming arrangements for youth participants, chaperone details, etc.).	

**Insurance:**

BC Artistic Swimming will make application for additional Commercial General Liability insurance for all members travelling outside of British Columbia which is an additional cost depending on the number of participants and location of the event. Accident insurance is not included. Individuals are responsible for securing their own travel medical coverage before traveling.

I agree to secure and pay for the travel insurance extension.  Yes  No

Are you aware of any other clubs from BC or Canada planning to attend this event?  Yes  No

**Acknowledgement:**

I hereby request that the club, coaches, athletes and volunteers described above receive permission from BC Artistic Swimming to attend the competition described herein.

Name of Person Submitting this Form:	
Position with Club:	
Date of Submission:	
Signature:	