LIFESAVING SOCIETY
The Lifeguarding Experts

APPLICATION TO SANCTION COMPETITIONS

1. The Host Competition package should include this approved application to inform competitors that the competition is sanctioned.

2. Currently certified Officials must be assigned positions for Sanctioned Events. The currently certified Chief Referee and Meet Manager must be named at the time of application.

3. A copy of the Host Competition package with Schedule of Events must be received with this application.

4. The Competition Host will ensure that all competitors are affiliated with the Lifesaving Society (hold a minimum of a current Bronze Medallion or be registered in a Lifesaving Society training program).

5. Sanctioned competitions must adhere to current competition manual rules and facility safety standards.

6. Please indicate in your correspondence if you require event promotion or a Certificate of Insurance.

Name of Competition _____

Host Club/Affiliate _____   Meet Date _____

Primary Location Name & Address _____

Additional Location Names: _____

Meet Manager: _____   Certification Date: _____

Chief Referee: _____   Certification Date: _____

Application submitted by _____   Daytime Phone Number: _____

Email Address: _____

Date Submitted: _____   Applicant's Signature: _____

(For Office Use Only)

☐ Affiliate Approval   ☐ Meet Manager Approval   ☐ Chief Referee Approval

Application: Approved: _____   Denied: _____

Comments: _____

Approval Date: _____   Lifesaving Society: _____

(Lifesaving Sport Manager or designate)

Please return completed application to:

Lifesaving Society

400 Consumers Road Toronto, ON M2J 1P8

Phone: 416-490-8844 Fax: 416-490-8766 Email: sport@lifeguarding.com

SANCTIONED COMPETITIONS FINANCIAL REPORT

Return completed form to the Lifesaving Society office within seven (7) days of the competition.

Name of Competition _____

Host Club/ Affiliate _____   Meet Date _____

Number of Competitors Participating: _____

Number of Clubs/Affiliates Participating: _____

Flat rate per Competitor Fee

      Number of Competitors _____ x $3.50 = $ _____

      Total Due $ _____

      (Price includes GST)

Return financial report with payment in full – Affiliate Invoice, Cheque (payable to the Lifesaving Society), Money Order, VISA, MasterCard, or American Express – to:

Lifesaving Society
400 Consumers Road Toronto, ON M2J 1P8
Phone: 416-490-8844 Fax: 416-490-8766 Email: sport@lifeguarding.com

☐ Invoice   ☐ Cheque   ☐ Credit Card

Credit Card: _____   Expiry Date: _____

Date: _____   Signature: _____