Suburban Swim League
Time Trials/Championships
Application

Pool: _____

SSL Representative: _____ Tel #: _____

Pool Contact: _____ Tel #: _____

Type of Application

_____ Championships   _____ Time Trials   _____ Both

Are you willing to host multiple events (on different days)?   ____ Yes   ____ No

Experience

Has your pool previously hosted:

_____ Time Trials   _____ # of years   _____ Latest year you hosted

_____ Championships   _____ # of years   _____ Latest year you hosted

Facility

Pool Description

Length: _____ yards or meters (circle one)   Number of Lanes: _____

Pool shape (rectangle, L-shape, Z-shape): _____

Water Depth: Deep End _____   Shallow End _____

Deck Space (describe): _____

Easy or difficult to officiate (explain): _____

Approximate number of spectators the pool can accommodate: _____

PA System? _____

Lighting (describe) _____

Limitations: Are there any limitations associated with hosting an event, such as restrictions on the days of the week the event can be held, etc.? _____

_____

Concession Stand: (Please checkmark one)   _____ Yes   _____ No

If no, how will pool handle? _____

_____

Computer Scoring:

Is there a sheltered area where a computer can be located? _____ Yes _____ No

If no, is there vehicle access to the pool deck? _____

Parking

Capacity of parking lot at pool: _____

Is additional parking available? _____ Where? _____

Is street parking available? _____

Insurance

Name of insurance carrier: _____

Amount of liability coverage: _____

Does your pool have any riders or provisions in the policy for coverage of swim meets: _____

_____

REMINDER: Teams interested in hosting time trials and/or championships will express their interest by submitting an application at the MARCH SSL BOARD MEETING.