## **Pacific Northwest Association of Masters Swimmers** PNA Date Request Form - For January - June 2024 Meets and Clinics

Name of sponsoring team/workout group:		Abbreviation:	
Contact person:	Phone:		
Email:			
Type of event (check one):	Short-course yards	Short-course meters	
	Long-course meters	Clinic	
Title of event:			
Location of event:			
Physical address of event facility (if new)	:		
Proposed date of event:	(first choice)	(second choice)	
Meet Referee (for pool meets):	Email:		
FOR POOL EVENTS ONLY: Sanction Status (check one): Sanctioned	Event Recognized	Event	
Order of Events (check one)			
Regular PNA order of events ro	and or 1650/1500 free)	Relay distances and inclusion of optional events (400 IM and or 1650/1500 free) selected by meet host during sanction/recognition process	
Championship PNA order of ev	vents		
Custom order of events	Submit detail during sa	anction/recognition process – not	
CLINICS ONLY: Details including focus a	nd "leader":		
COMPLETE AND SUBMIT this form no late	er than Sentember 15, 2023 to: 1	orraine Masse pnameets@swimpna.org	

Please address your questions to: Pool meets - Lorraine Masse or Clinics - Wade Praeger

NOTE: Once your event has been approved by the PNA Board for its place on the annual calendar, you will need to complete the formal bid packet and submit all necessary documents to your coordinator and to the online USMS sanction tool for approval and the assignment of your sanction number. Detailed steps for sanctioned and recognized meets and clinics are on the PNA website at swimpna.org.