



March 12, 2009

MEMORANDUM

TO: FHSAA Representative, Athletic Director, Head Swimming & Diving Coaches at
Member Schools
County Athletic Directors
Swimming Facility Managers

FROM: M. Denarvise Thornton, Associate Executive Director
Shanell Young, Director of Athletics

RE: 2009 FHSAA Regional Swimming & Diving Meets

The Florida High School Athletic Association currently is making plans for the 2009-10 school year. Accordingly, we are interested in establishing the host schools and sites for the 2009 FHSAA Regional Swimming & Diving Meets.

If your school/facility is interested in serving as host for one or more of the 12 regional meets to be held on November 5, 6, or 7th, please complete the attached application to host form and submit it with a letter of invitation **so that it is received in the FHSAA Office no later than April 13, 2009**. The FHSAA mailing address is 1801 NW 80th Blvd., Gainesville, FL 32606. The application and letter also may be faxed to (352) 244-5053. It is our intention to determine the sites and host schools for the 2009 regional meets by May 1, 2009.

Team IP is the "official provider" of souvenir merchandise for all FHSAA regional swimming & diving meets. No souvenir merchandise other than that which is produced by Team IP may be sold in conjunction with the meet. Host schools must agree to permit Team IP representatives to come on site and sell souvenir merchandise at each meet. Host schools also must agree to permit FHSAA corporate sponsors access to the facility in which meets are held.

Schools participating in the 2009 FHSAA State Swimming & Diving Series have been reassigned to one of 12 districts in their respective classifications. You may review the revised 2009 state series assignments on the FHSAA website (www.fhsaa.org). The four regional complexes in each classification are comprised of three districts as follows [Note: Number of qualifiers in each individual event has been increased from 16 to 24:]

Region 1 Districts 1, 2, 3
Region 2 Districts 4, 5, 6
Region 3 Districts 7, 8, 9
Region 4 Districts 10, 11, 12

Please direct any questions you have regarding the regional meet format or host application process to Shanell Young by e-mail (syoung@fhsaa.org) or by phone (352-372-9551 ext. 310). Otherwise, we look forward to receiving your application to host and letter of invitation **no later than April 13, 2009**.



Application to Host 2009 Regional Swimming & Diving Meet(s)

A school wishing to serve as host for one or more regional meets in the 2009 FHSAA Swimming & Diving Series must complete and submit this form, along with an official letter of invitation, to Associate Director of Athletics Shanel Young by fax (352) 244-5053 or by mail (FHSAA, 1801 NW 80th Blvd, Gainesville, FL 32606). Applications must be received by **5 p.m. April 7, 2006**. See FHSAA.org for assignments for FHSAA State Swimming & Diving Series. [Note: Number of qualifiers in each individual event has been increased from 16 to 24.] Please write legible. If you would like this document email to you in a Word document, please email syoung@fhsaa.org.

This application is for:

- | | | |
|--|--|--|
| <input type="checkbox"/> Region 3A-1 (districts 1-3) | <input type="checkbox"/> Region 2A-1 (districts 1-3) | <input type="checkbox"/> Region 1A-1 (districts 1-3) |
| <input type="checkbox"/> Region 3A-2 (districts 4-6) | <input type="checkbox"/> Region 2A-2 (districts 4-6) | <input type="checkbox"/> Region 1A-2 (districts 4-6) |
| <input type="checkbox"/> Region 3A-3 (districts 7-9) | <input type="checkbox"/> Region 2A-3 (districts 7-9) | <input type="checkbox"/> Region 1A-3 (districts 7-9) |
| <input type="checkbox"/> Region 3A-4 (districts 10-12) | <input type="checkbox"/> Region 2A-4 (districts 10-12) | <input type="checkbox"/> Region 1A-4 (districts 10-12) |

School Name: _____ **City:** _____

Name of Meet Director: _____ **Title:** _____

E-Mail Address (required): _____

Phone: (____) _____ **Fax:** (____) _____ **Cell:** (____) _____

Name of Hy-Tek Operator: _____ **Title:** _____

E-Mail Address (required): _____

Phone: (____) _____ **Fax:** (____) _____ **Cell:** (____) _____

Previously hosted a district meet: (Yes) (No) . If yes, year(s) hosted: _____

Name of swimming facility: _____ **City:** _____

Pool is: (Indoor) (Outdoor); (On Campus) (Off Campus). If off campus, owned by: _____

Ingress to and egress from the facility is controlled so as to allow for the charging of admission: (Yes) (No).

Pool is 25-yard course: (Yes) (No). Depth of water at start: _____. Number of lanes: _____. Width of lanes: _____.

Seating capacity for spectators: _____. Seating capacity on deck for competitors/coaches: _____. Total seating capacity: _____.

Width of pool deck: _____ feet. Separate diving well: (Yes) (No). Electronic scoreboard: (Yes) (No).

Ability to configure pool, or access to other pool, for warm-up/cool-down lanes: (Yes) (No). If yes, number of such lanes: _____.

Workroom for media with access to phone line(s): (Yes) (No). Comments: _____.

Proposed date of meet(s) [must be either November 5, 6, or 7th]: _____.

Proposed starting time for warm-ups: _____. Proposed starting time for competition (cannot be before 9 a.m.): _____.

*****If applying to host more than one regional meet on the same day, attach a proposed time schedule.*****

List several area hotels, distance from the pool and room rates for this time of year.

- | | | |
|--------------|-----------------------------|---------------------------|
| Hotel: _____ | ; Distance from pool: _____ | ; November rate: \$ _____ |
| Hotel: _____ | ; Distance from pool: _____ | ; November rate: \$ _____ |
| Hotel: _____ | ; Distance from pool: _____ | ; November rate: \$ _____ |

We are capable of forwarding meet results via the Internet to FHSAA Office immediately upon conclusion: (Yes) (No).

We will comply with FHSAA Merchandising Policies: (Yes) (No). We will grant access to FHSAA sponsors: (Yes) (No).

Name of Principal: _____ **Signature:** _____

Name of Athletic Director: _____ **Signature:** _____

Name of Head Girls Swimming & Diving Coach: _____ **Signature:** _____

Name of Head Boys Swimming & Diving Coach: _____ **Signature:** _____