



Third Party Event Sanction Application

Please submit completed application to jcolasanti@fhsaa.org

EVENT INFORMATION

Sport:		
Name of Event:		
Name of the insured party covering the event:		
Host Facility(s):		
City:	State:	ZIP Code:
Name of 3 rd Party Host:		
Mailing address:		
City:	State:	ZIP Code:
Name and Title of Event Contact:		
Email Address:		
Event Date:	Participation Fee:	Admission Fee:
Will the event be televised?		
Will the event be streamed online?		
Will the event be broadcasted on radio?		
Does the promoter have a website indicating they promote sporting events or sell recruiting to colleges (or help athletes promote themselves)?		
If yes to above, what is the website URL?		
What portion of the ticket sales will be retained by the 3 rd party?		
Is the 3 rd party selling sponsorships or taking local donations for this event?		
Is the 3 rd party providing any event staff (i.e. ticket sellers, officials, etc.)? ____ If yes, please list staff they are providing:		

PARTICIPANT INFORMATION

Are there any non-member Florida schools participating?
Are there any non-member out of state schools participating?
Are there any out-of state teams participating?
Are there any international teams participating?
List of Participating Schools with Contact Information for each below. Add additional pages if needed.