



U. S. Masters Swimming

2012 OFFICIAL RECOGNITION

This recognition is issued to: _____

for the following _____

to be held at _____ on _____

Requestor Name _____

Requestor Phone _____ Requestor Email _____

This pool: _____ meets the pool length certification requirements _____ with _____ without touchpads.
_____ meets the pool length certification requirements _____ with _____ without touchpads, but is a bulkhead pool so a Pool Length Certification Form needs to be completed following each session of the meet and submitted with the meet results (see Application for Sanction form criterion #9)
_____ does not meet the pool length certification requirements so entry forms and programs must reflect that times swum will not be submitted for Top 10 or record consideration (see Application for Sanction form criterion #6)

1. Recognition is based on the application provided by the above organization certifying that the conduct of this event shall conform to relevant USMS swimming rules and administrative regulations.
2. Times achieved at events may be considered for USMS national records and Top Ten times if the event has been granted recognition and a designated USMS observer is present and verifies in writing that the conduct of the competition conforms to the relevant USMS swimming rules and administrative regulations. Times achieved at events sanctioned by USA Swimming or SCN, or at FINA championships, shall be considered for USMS national records and Top Ten times without formal application for recognition. It is the responsibility of the swimmer to submit times obtained in recognized events with complete documentation to the appropriate LMSC Top Ten recorder and the Records and Tabulation Committee chair.
3. This recognition is not transferable.
4. If this event is a competition, the results and required facility certifications shall be submitted within 14 days of the conclusion of the event in the proper format to:

_____	and	_____
Top Ten Recorder		Sanctions Chair
_____		_____
Address		Address
_____		_____

Recognition issued by: _____
Official name of LMSC

_____ City State Zip
Address

_____ Phone number
Signature of Sanctions Chair

Recognition number

Date issued