**PROMOTER’S REPORT FORM TO REGIONAL LICENSING OFFICER**

|  |  |
| --- | --- |
| LICENCE NUMBER |  |
| MEET |  |
| CLUB |  |
| VENUE (Pool & Town) |  |
| DEPTH OF DIVE END |  |
| HEIGHT BLOCKS TO WATER |  |
| DATE |  |
| ORGANISER/PROMOTER |  |
| NAME & CONTACT DETAILS OF REFEREE |  |

|  |  |  |
| --- | --- | --- |
| CHECK REQUIRED | TICK | COMMENTS |
| Promoter briefed by pool staff prior to meet |  |  |
| Please indicate any problems encountered which may have influenced the smooth flow of the competition or reasons for exceeding the daily limit. |  |  |

|  |  |
| --- | --- |
| Computer results e-mailed to rankings@swimming.org + copy of results in document format.(Please send complete Sportsystems folder zipped ) | Date & Time: |
| Full list of all technical officials enclosed with this form, to include their duties at the meet. |  |
| Meet entry summary printout or if not available copy of programme |  |
| Cheque for levy payable to Region OR Date of BACS payment (delete as applicable) | Entries & p = |
| Date sent to Regional Licensing Officer | Date: |

I confirm that the Licensing Criteria appropriate to this level of Licensed Meet were met.

Signature of person submitting report……………………………………………………

Print Name……………………………………………….

Date : …………………….