



YMCA NATIONAL SWIMMING CHAMPIONSHIP COACH AUTHORIZATION

This procedure has been established to provide for the safety of all participants and to ensure that certified coaches are present with all athletes at the meet. Please complete this form if your team is to be represented by another coach for part or all of the meet. The representing coach needs to bring the signed form to Check-In. Do not send this form to the Meet Director.

YMCA Association #: _____

YMCA_NAME: _____

YMCA_ADDRESS: _____

The [YMCA NAME]: _____ swim team does not have a certified and registered coach attending part or all of the meet. We authorize _____, coach of the _____ [YMCA NAME] swim team, to represent and supervise our participants on the pool deck on the following dates:

_____.

_____, _____

(CEO / Executive Director and Date)

YMCA NUMBER: _____

YMCA NAME: _____

Representing YMCA Coach

I agree to represent [YMCA NAME]: _____ participants at the 2024 YMCA NATIONAL LONG COURSE CHAMPIONSHIP MEET. I will be present during their events and see that they are supervised while on deck. This procedure involves safety considerations. I will file relay cards and deposit scratch cards at the designated times and supervise warm-ups. In the event of injury, I will assume responsibility for administering immediate first aid and determining if an emergency squad is needed if further treatment is warranted.

_____, _____

(Certified Coach and date)

_____, _____

(YMCA Name and YMCA Association #:)