## ATHLETICS NEW BRUNSWICK

## POLICY STATEMENT 7.1: SANCTION REQUEST FORM

This request is forwarded to reserve the date for your event. It must be complete for it to be accepted.

<ul><li>1) Type of Event:</li><li>a) track &amp; field (refer to #2):</li><li>b) cross country (refer to #2a,b,f,c) road race (refer to #2a,b)</li></ul>	g) () ()		
2) Level of Event:  a) regular  b) championship  c) multiple events  d) limited competition  e) high performance  f) all comers meet  g) series event			
3 a) Distance(s) if road race or cross  b) Individual quants if high perform			
b) individual events 11 mgn periori	nance/iimited competition	on or all comers meet:	
4) Name of Event:			
5) Date(s) Requested:	Alternate:		
6) Location of Event:			
7) Age Groups Offered:			
8) Name of Host Group:			
9) Name of Contact:			
Address:			
Telephone:	Fax:		
A \$30.00 administrative fee/perfor	mance bond must acco	ompany this form.	
Deadlines outlined in PS 07.2 (c) m	nust be followed.		
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Date Received: Date	te(s) Granted:	Fee Received:	
Sanction Fee Paid:	Report/Results Received	1.	