



## **Application for a Sanctioned RELAY Marathon Swim in the Monterey Bay**

The Monterey Bay offers some of the most challenging conditions, yet beautiful surroundings, for the most committed of ultra-marathon open water swimmers.

**A relay team can consist of 2 or more swimmers.**

Completed packages are reviewed within two weeks of receipt and the MBSA will contact you with any questions and/or confirmation of your swim date and observer assignments.

**ONLY ONE APPLICATION PER RELAY TEAM IS REQUIRED.**

Your first step in completing this application is to charter your boat and captains. This will ultimately define your swim date and start time.

Please spend some time reviewing the rules, tips for planning your swim and other resources on the MBSA website ([www.swimmonterey.com](http://www.swimmonterey.com)) before completing this application. This information can help to ensure your application and swim plan are as complete as possible.

EVERY MEMBER OF YOUR RELAY TEAM, INCLUDING SUPPORT CREW MUST READ AND UNDERSTAND THE RELAY SWIM RULES, AVAILABLE FOR REVIEW ON THE MBSA WEBSITE. THESE RULES WILL BE READ AND AGREED TO PRIOR TO THE START OF THE SWIM RELAY.

IF YOUR TEAM WOULD LIKE TO COMPLETE A SWIM UNDER MODIFIED RULES, PLEASE MAKE THESE MODIFICATIONS CLEAR TO YOUR OBSERVERS PRIOR TO THE START OF YOUR SWIM. THESE MODIFICATIONS WILL BE NOTED IN THE FINAL SWIM DOCUMENTATION.

We look forward to supporting your event.

Sincerely,

The MBSA Board of Directors



**Completed Applications can be mailed, faxed, or emailed.**

Send Entire Application Package and All Fees to:

**Monterey Bay Swimming Association**

**C/O Relay Applications**

**333 Arthur Avenue,  
Aptos, CA 95003**

Or Email To:

**[contact@swimmontereybay.com](mailto:contact@swimmontereybay.com)  
[cc:stapley@secondpeak.com](mailto:cc:stapley@secondpeak.com)**

**NOTE: Final applications must be submitted within 60 days of your swim start.**  
(if you would like to schedule a relay within the 60 day window, please contact MBSA before sending in your application)

## **Relay Sanction and Observer Fees**

All payments must be in **US Dollars** and made to: *Monterey Bay Swimming Association*. Payments can also be made via PayPal through the MBSA website.

### **2025 Relay Sanction Fees:**

**\$1200 per team**

This includes:

Pre-swim support, two official observers, tracking, detailed swim report, documentation, ratification, promotion (if wanted), verification with the press (if wanted), certificate, medal, and recognition at the annual awards ceremony.

MBSA is the **ONLY** sanctioning body for swims across the Monterey Bay. All observers and support crew work on a volunteer basis.

If needed, ask about our payment plan, scholarships, and other support with sanctioning fees.

## Relay Team

Name of Relay Team: \_\_\_\_\_  
(Enter as you would like it to appear on the official MBSA certificate, and list of successful relays.)

Name of Team Leader: \_\_\_\_\_  
(Relay Team Leader can be a swimmer or coach/crew)

Relay Team Leader Address: \_\_\_\_\_

Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Select your Swim:

- Monterey Bay Crossing North to South Relay
- Monterey Bay Crossing South to North Relay

### **CONSULT YOUR CHARTER'S CONTRACT TO CONFIRM THE FOLLOWING DETAILS:**

Navigator (boat captain): \_\_\_\_\_ Name of Charter Vessel: \_\_\_\_\_

Date to Meet at the Docks/Port: \_\_\_\_\_ Scheduled Departure Time: \_\_\_\_\_

Max Boat/Crew Capacity (including swimmer): \_\_\_\_\_

Planned Start Date/Time of Swim: \_\_\_\_\_

**Please confirm that your navigators are also familiar with the Rules of the swim, as defined by MBSA.**

**Complete for each relay swimmer**

**Swimmer #1:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (name and #): \_\_\_\_\_

**Swimmer #2:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (name and #): \_\_\_\_\_

**Swimmer #3:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (name and #): \_\_\_\_\_

**Swimmer #4:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (name and #): \_\_\_\_\_

**Swimmer #5:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (name and #): \_\_\_\_\_

**Swimmer #6:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact (name and #): \_\_\_\_\_

Witness Name: \_\_\_\_\_ Witness Signature: \_\_\_\_\_

**Swim History**  
**COMPLETE ONLY ONE SWIM HISTORY FOR THE RELAY TEAM**

Please describe the level of open water and cold water swim experience of your relay team. Please specify the longest cold water swim completed by each relay team members.

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