



# 2024 USA DIVING OLYMPIC TRIALS LOI PACKET

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## EVENT OVERVIEW

The 2024 USA Diving Olympic Trials serve as the qualifier for the 2024 Olympic Games in Paris, France. Top divers from around the country will contend for Olympic team spots in 3-meter and 10-meter individual and synchro events. USA Diving is accepting Letters of Interest from potential hosts for May 2024.

Facilities for consideration must be able to host a large group of athletes, coaches, and officials. USA Diving will require a facility with a minimum of two 1-meter and two 3-meter springboards (side-by-side), 5-, 7.5- and 10-meter platforms. Facilities with dryland training opportunities will be preferred. Spectator seating must have a capacity of at least 1,500.

## DATES OF FACILITY USE / COMPETITION

The 2024 USA Diving Olympic Trials will be held over 8 competition days.

**Projected Competition Dates:** June 16-23, 2024

A minimum of 4 practice days are required prior to the first day of competition.

**Projected Practice Dates:** June 12-15, 2024

*Note: These dates are subject to verification by the United States Olympic and Paralympic Committee and USA Diving's broadcast partner, NBC.*

## LOI PROCEDURE

**LOIs must be submitted to the USA Diving national office by June 1<sup>st</sup>, 2022.** Finalized LOIs include complete information below, photographs of the venue inside and outside, and a cover letter. USA Diving reserves the sole right to extend the deadline pending acceptable review of LOIs.

Please email LOIs to: Olivia Rosendahl at [oliviari@usadiving.org](mailto:oliviari@usadiving.org).

# 2024 USA DIVING OLYMPIC TRIALS

## LOI INFORMATION

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### HOST INFORMATION

Host Organization: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

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### PARTNERSHIPS

LOIs submitted from groups working in partnership with a local sports commission, with local diving clubs, and with a Convention and Visitors Bureau will be preferred, as this partnership will assist with event marketing/promotion, volunteers, etc. Please list your partnerships below:

Sports Commission: \_\_\_\_\_

CVB: \_\_\_\_\_

Local Diving Clubs: \_\_\_\_\_

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### FACILITY INFORMATION

Facility: \_\_\_\_\_ Indoor or Outdoor: \_\_\_\_\_

Facility Contact: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Is facility in compliance with requirements of the Americans with Disability Act?      Yes      No

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**Diving Equipment**

Does the facility have a separate diving well? \_\_\_\_\_

Number of 1-meter boards: \_\_\_\_\_ Type of boards: \_\_\_\_\_ Age: \_\_\_\_\_

Number of 3-meter boards: \_\_\_\_\_ Type of boards: \_\_\_\_\_ Age: \_\_\_\_\_

Type of stands: \_\_\_\_\_ Short stands or tall: \_\_\_\_\_

Platform levels: \_\_\_\_\_ Width of 10-meter: \_\_\_\_\_ Length of 10-meter: \_\_\_\_\_

Width of 7.5-meter: \_\_\_\_\_ Width of 5-meter: \_\_\_\_\_

Platform surface: \_\_\_\_\_ Age: \_\_\_\_\_

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**Water**

Pool depth under... 1-meter: \_\_\_\_\_ 3-meter: \_\_\_\_\_ Platforms: \_\_\_\_\_

Type of surface agitation: \_\_\_\_\_ Normal water temperature: \_\_\_\_\_

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**Seating**

Permanent seating capacity: \_\_\_\_\_ How many seats profile to diving boards: \_\_\_\_\_

Can additional temporary seating be added? \_\_\_\_\_

**Dryland**

Does your facility have dryland training center/area? If so, please describe (please list number of trampolines, dryboards, belts, or anything else that may be relevant).

\_\_\_\_\_  
\_\_\_\_\_

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**QUESTIONS TO ADDRESS IN COVER LETTER**

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Please answer the following questions on a separate page(s) and attach it to your final application.

1. Why is your city interested in hosting the 2024 USA Diving Olympic Trials?
2. Please include any additional information that would assist USA Diving in evaluating your LOI.

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**LOI AGREEMENT**

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**I acknowledge that I have read and agree to comply with all LOI requirements stated in this Information Packet.**

Applicant Signature

Local Organizing Committee Representative:

\_\_\_\_\_  
Signature Title Date