WSY Swimming

STANDARD ENTRY FORM FOR INDIVIDUAL EVENTS AND RELAYS

$3.00 PER INDIVIDUAL EVENT

USE A SEPARATE SHEET FOR EACH AGE-GROUP & SEX.
USE A SEPARATE SHEET FOR RELAYS.

MEET:
TEAM:
TEAM INITIALS:
DATES:
AGE GROUP:

EVENT NR:											
NAME:											
QT:											

NAME LAST, First, MI	AGE	USS #	SEED TIME											

PLEASE TALLY IN EACH DIRECTION:

ATTEST THAT THE ATHLETES LISTED ABOVE ARE PROPERLY REGISTERED WITH UNITED STATES SWIMMING ANT THAT THEY HAVE ACHIEVED THE SEED TIMES RECORDED.
IF YOU HAVE ANY QUESTIONS REGARDING THESE ENTRIES, PLEASE CONTACT THE MEET DIRECTOR DIRECTLY.

TOTAL ENTRIES THIS PAGE_____X_____=$_____

ENTRIES WILL NOT BE PROCESSED WITHOUT THIS INFORMATION

TEAM REPRESENTITIVE'S NAME **SIGNATURE** **PHONE**

TEAM REPRESENTITIVE'S ADDRESS