OPEN WATER ENTRY FORM (Manual Entries Only)

Team:	Code:	

In each box below, put:	Event # Event		1 Girls	Boys	3 Girls	4 Boys	5 Girls 13-14	6 Boys	7 Girls	8 Boys	
NAME on the top line, ID # underneath											
Mark the age in the box to the right. Mark if this swimmer is part of a relay.	Age	Relay Y/N	Course SCY SCM LCM	10&U	10&U	11-12	11-12	13-14	13-14	15&0	15&0
Indicate the course where the qualifying time took place.											
Put the seed time under the corresponding event											
Name on USA ID Card											
USA ID Number											

ENTRY SUMMARY

Please fill out the information requested below and submit with your payment.

NAME OF CLUB		С	_			
Number of individual entries:		Х	\$35.00	=		_
Number of Swimmers – Michigan Swimming Surcharge		Χ	\$3.00	=		_
TOTAL AMOU	INT ENCL	OSED:				_
Club Official Submitting Entry: Name:	Coache				_	
Address:					_	
City:					-	
State: Zip: Head Coach	E-mail Ad	dress: _				
Daytime Phone: () Club Official	Email:					
Signature of Club Official/Coach			Dat	te		
*You may have one designated spokesperson for your coach would be the logical person.	team to ta	lk to the	e referee or	Clerk-o	f-Course.	The
Please list the name of your spokesperson:					_	
Did you include:						
Entries in Writing Check for entries and surcharges This completed form						