



MEET ENTRY FORM

NAME _____

AGE FOR MEET _____

USA SWIMMING # _____

EVENT	EVENT #	EVENT FEE

• Out of county & Prelim-Final Meets: **\$10** _____

• In County Meets: **\$5** _____

• Host Team Facility Surcharge _____

MEET FEES TOTAL: _____

TOTAL FEES = Event Fees + Team Meet Fee + Facility Surcharge _____

- Please make payment to TAMARAC SWIMMING
- Please place in an envelope labeled with family's name.

