

# IES Master Entry Form for Championship Meets

Meet: \_\_\_\_\_ Meet Dates: \_\_\_\_\_ Page: \_\_\_\_\_ of \_\_\_\_\_

Coach or Rep: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Team Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Swimmer's name (last, first) USS#	Age	Enter individual event numbers with entry times below Enter only _____ times. 'No time' entries are acceptable for "B" swimmers. SCY-LCM-SCM									TOTAL EVENTS
		Day 1			Day 2			Day 3			
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											
USS#:											

Total individual events this page: \_\_\_\_\_

Surcharge: _____ x \$10.00	\$
Individual Events: _____ x \$2.25	\$
<b>Total this page</b>	<b>\$</b>

