

ENTRY SUMMARY SHEET

PLEASE NOTE: THIS FORM MUST BE COMPLETED AND RETURNED WITH THE ENTRY, OR THE ENTRY WILL NOT BE ACCEPTED.

CONNECTICUT SWIMMING, INC.  
REGIONAL CHAMPIONSHIP

Club Code: \_\_\_\_\_ Email: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
Club Address: \_\_\_\_\_ Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

EVENT SUMMARY

|                         | <u>Number of Swimmers</u> | <u>Number of Ind. Events</u> | <u>Number of Relays</u> |
|-------------------------|---------------------------|------------------------------|-------------------------|
| 10/Under Girls          | _____                     | _____                        | _____                   |
| 10/Under Boys           | _____                     | _____                        | _____                   |
| 11/12 Girls             | _____                     | _____                        | _____                   |
| 11/12 Boys              | _____                     | _____                        | _____                   |
| 13/Over Girls           | _____                     | _____                        | _____                   |
| 13/Over Boys            | _____                     | _____                        | _____                   |
| Total Individual Events | _____                     | X \$5.00 =                   | _____                   |
| Total Relay Events      | _____                     | X \$10.00 =                  | _____                   |
| Relay-Only Swimmers     | _____                     | X \$2.00 =                   | _____                   |
| Manual Entry Fee        | _____                     | X \$5.00 =                   | _____                   |
| Total Amount Enclosed   | _____                     |                              |                         |

Make checks payable to **Connecticut Swimming, Inc.**

Send entries to: Nan Cooper 27 Cortland Lane Glastonbury, CT 06033-3305

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