

SOUTHERN CALIFORNIA SWIMMING/USA SWIMMING 'PROOF OF TIME' ENTRY CARD

SWIMMER'S _____ AGE _____ MALE
 NAME _____ LAST NAME _____ FIRST NAME _____ M.I. _____ FEMALE

EVT NO.	FREE (SUBMITTED TIME)	EVT NO.	BACK (SUBMITTED TIME)	EVT NO.	BREAST (SUBMITTED TIME)	EVT NO.	FLY (SUBMITTED TIME)	EVT NO.	IND. MEDLEY (SUBMITTED TIME)
	25 : .		25 : .		25 : .		25 : .		100 : .
	50 : .		50 : .		50 : .		50 : .		200 : .
	100 : .		100 : .		100 : .		100 : .		400 : .
	200 : .		200 : .		200 : .		200 : .		
	400/500 : .								
	800/1000 : .								
	1500/1650 : .								

NO. OF EVENTS _____ X \$ _____
 PLUS SURCHARGE \$ _____
 PAY THIS AMOUNT \$ _____

USAS NUMBER:

Birthday mm/dd/yy			1 st 3 letters 1 st name			MI	1 st 4 letters of last name		

 MEET ENTERING: _____
 TEAM: _____
 COACH: _____ PHONE _____
 PARENT/GUARDIAN: _____ PHONE _____
 PARENTS EMAIL: _____

*PLEASE DO NOT FOLD
OVER*

*PLEASE DO NOT FOLD
OVER*

PROOF OF TIME BOX

FILL IN THE FOLLOWING BOX ACCURATELY				BIRTHDATE OF SWIMMER		(Mo.) (Day) (Year) (Age)		
Distance	Stroke	Time	Where (Name, Place of Meet)	Month	Day	Year		

(NAME -PLEASE PRINT)

(SIGNATURE OF COMPETITOR, PARENT OR GARDIAN)

NOTE:

THERE IS AN AUTOMATIC \$10.00 SEARCH FEE FOR MISSING OR INCORRECT INFORMATION.
SUBSTANTIAL FINES MAY BE IMPOSED FOR FALSE TIMES.