

TOWN of TONAWANDA MEET ENTRY FORM
Meet info is online at the Team Website: ttscswimming.com

If you do not have access to the website please contact coaches for the information.

If this is your first meet or have any questions regarding the procedures please contact your Coach

NAME: _____

MEET: TTSC Holiday meet

DATE(S): Dec 28-29, 2009

PLEASE FILL IN EVENT #'s		
Event#	Event#	Event#
50FREE_____	50FLY_____	50BACK_____
100FREE_____	100FLY_____	100BACK_____
200FREE_____	200Fly_____	200Back_____
Event#		Event#
50BREAST_____		
100BREAST_____		100IM_____
200Breast_____	200 IM_____	

Price per event: \$3.50 X _____ (# of events) = \$_____ (3 event per day)

plus surcharge:\$__5.00_____

TOTAL \$_____

RETURN FORM WITH PAYMENT BY Dec 1st **TO:**

Scott Vanderzell

927 Stony Point

Grand Island, NY 14072

(ph# 775-5049)

Checks payable to: Town of Tonawanda Titans SC

Parent signature: _____