**TIMES REQUEST FORM HIGH SCHOOL MEET**

**THIS FORM IS TO BE USED TO REQUEST TIMES TO BE ENTERED INTO THE ILLINIOIS YMCA SWIMMING TIMES DATABASE AND MUST BE ACCOMPANIED BY A HIGHLIGTED PRINT OUT OF REQUESTED TIMES ACHIEVED OR A MEET BACK-UP.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NAME  |  | BIRTHDAY |  | SEX |  |

 (LAST) (FIRST) (MI) (M/F)

|  |  |  |  |
| --- | --- | --- | --- |
| CLUB AFFILIATION  |  | CLUB CODE |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| EVENT  |  |  |  |  | OFFICIAL TIME |  |

 (DISTANCE) (METERS / YARDS) (STROKE) (COURSE)

|  |  |  |  |
| --- | --- | --- | --- |
| MEET TITLE  |  | MEET LOCATION |  |

 (NAME OF MEET) (CITY AND STATE)

|  |  |  |  |
| --- | --- | --- | --- |
| MEET START DATE |  | MEET END DATE |  |

**USE AREA BELOW FOR ADDITIONAL SWIMS ONLY IF ACHIEVED AT THE SAME MEET**

**FOR THE SAME ATHLETE**

|  |  |  |  |
| --- | --- | --- | --- |
|   | EVENT STROKE & DISTANCE | DATE SWUM | TIME ACHIEVED |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |

E-mail completed form along with a meet back-up or a copy of the results to ilswyms@gmail.com