

**MONTANA SWIMMING STATE RECORD APPLICATION FORM**

Date \_\_\_\_\_ Long Course Meters \_\_\_\_\_ Short Course Yards \_\_\_\_\_

***Swimmer Information:***

Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Age (at time of swim) \_\_\_\_\_

Club Name \_\_\_\_\_ Club Abbreviation: \_\_\_\_\_

Swimmer's Home Address \_\_\_\_\_

Swimmer's signature \_\_\_\_\_

***Record Information:***

Meet \_\_\_\_\_ Date of Swim \_\_\_\_\_

Event: Distance \_\_\_\_\_ Stroke \_\_\_\_\_ Time: \_\_\_\_\_

Is this swim a relay leadoff leg split or an initial distance split? YES \_\_\_\_\_ NO \_\_\_\_\_

If this is a leadoff leg or split time, what was the event? \_\_\_\_\_

Attest Signature \_\_\_\_\_

(Attest signature is usually the coach's signature or team representative at meet.)

**Email to:** Kyle Kallin MT Swimming Record Chairperson [kallinkyle545@gmail.com](mailto:kallinkyle545@gmail.com)

Revised 2/4/2020

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