USA Swimming
Swimmer Assignment Form

Name of Meet:_____

Date: _____ City:_____

Name of Swimmer(s):

_____ _____

_____ _____

_____ _____

Name of Swimmer's Team:_____

I, _____, agree to act as coach for the
(Print your name)
above named swimmer(s) during the pre-meet practice, warm-up and the competition.

_____ _____
Coach's Signature Date

_____
Coach's Team Name

_____
Coach's Cell Phone Number