GIRLS ENTRY FORM

Team Name:																								
												Girl's Name	Age	Event #	Entry Time	FEE (EVENTS X \$3)								
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Number of Crescendo Relay Teams	FEE (TEAMS X \$12)
	\$

Entries must be received no later than FRIDAY, NOVEMBER 7, 2008

Please make check payable to: **ASHTABULA Y SWIM TEAM**

Mail all entries to: Denise DiDonato

2231 East 43rd Street Ashtabula, OH 44004