

# 2014 NEO Division 3 Divisional Swim Meet Entry Form

YMCA Team Name \_\_\_\_\_

YMCA Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone \_\_\_\_\_

Coach's Name \_\_\_\_\_

Coach's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Coach's Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail Address \_\_\_\_\_

## Entry Fees (Hy-Tek Meet Manager Entries)

Individual Events \_\_\_\_\_ @ \$3 each = \_\_\_\_\_

Relay Events \_\_\_\_\_ @ \$12 each = \_\_\_\_\_

TOTAL = \_\_\_\_\_

**Return this form along with a paper copy of your entries and entry check payable to "North Canton YMCA" by Monday January 27<sup>th</sup>, 2014 to:**

**Bob Reolfi  
2902 Lee St NW  
North Canton, Ohio 44720**