**NORTHERN NEW JERSEY YMCA SWIM LEAGUE**

MEET CONFIRMATION FORM

Home Team

Visiting Team

Division

Meet Date Site

Warm-up Time:  Start Time:

Events Schedule:

Home Team Contact:

Home Team Contact’s Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Team Contact Phone Number:

Notes & Comments:

* (ex: No more than 6 extra heats)