

SWIMSTRONG

Coach Award Application Form

Due May 31

(This application, along with the attached goal worksheets, will be returned to you after they have been reviewed.)

Name _____ Date _____ Age as of Dec. 31 _____

1. Attach your Goal Worksheets you have kept during the indoor season to this Coach Award Application Form.
2. I competed in the November Splash Out Cancer
3. List the 4 (or more) USA swim meets (hosted by teams other than SwimStrong) you competed in from September through May along with the date(s) you competed.

Meet Name	Date(s)	Meet Name	Date(s)

4. Complete this chart using the applicable age group requirements*:

Age:	Event:	USA swim meet where event was legally completed
Event 1:	Freestyle	
Event 2:	Backstroke	
Event 3:	Breaststroke	
Event 4:	Butterfly	
Event 5:	Individual Medley	
Event 6:	Individual Medley	

*If your swimmer is 8 & U fill in the above chart using the column 1 information below (leave the last row, event 6, blank).

If your swimmer is 9-10 fill in the above chart using the column 2 information below (leave the last row, event 6, blank).

If your swimmer is 11-12 fill in the above chart using the column 3 information below (leave the last row, event 6, blank).

If your swimmer is 13 & O fill in the above chart using the column 4 information below.

Age group requirements:

8 & Under	9-10	11-12	13 & Over
100 Freestyle	200 Freestyle	500 Freestyle	500 Freestyle
50 Backstroke	100 Backstroke	100 Backstroke	200 Backstroke
50 Breaststroke	100 Breaststroke	100 Breaststroke	200 Breaststroke
50 Butterfly	100 Butterfly	100 Butterfly	200 Butterfly
100 Individual Medley	200 Individual Medley	200 Individual Medley	200 Individual Medley
			400 Individual Medley

5. List the one (or more) LESI Championship Meet you competed in this February or March along with the date(s) you competed.

Championship Meet Name	Date(s)	Championship Meet Name	Date(s)

