



# H.R.A. MEET ENTRY FORM

NAME OF SWIMMER: \_\_\_\_\_ ENTRY DUE DATE: Sunday, July 12

NAME OF MEET: CSI LC State Championships DATE OF MEET: 7-23,24,25,26 2009

EVENT #	DISTANCE	STROKE

*Please complete a separate entry form for each swimmer and turn in to your coach or the Swim Team Mailbox by the due date.*

**PLEASE DO NOT SUBMIT A CHECK AT THIS TIME.**

Total meet fees will be due upon the conclusion of the meet, and will be included in the monthly HRA invoice. *Please note: If payment is not received, your swimmer(s) may not be entitled to swim in the next meet.*

EACH FAMILY WILL BE RESPONSIBLE TO PAY FOR:

- the **individual events** they signed up for \*\*
- the **meet surcharge**
- the **HRA team processing** fee (In-town: \$3.00 / Out-of-town: \$5.00)
- **\$1.00 for each relay** that they swim.

*\*\*This responsibility remains in full force in the event any or all portions of a meet are rescheduled (for any reason: weather, pool availability, number of entries, etc.) from the originally published date(s).*

INFORMATION FOR THIS MEET:

- Individual Event: \$ \_\_\_\_\_
- Meet surcharge: \$ \_\_\_\_\_
- HRA team processing fee is: \$ \_\_\_\_\_

**If you have questions, please contact Matt Beck.**