

Meet Reservations may not be postmarked earlier than Sept 12, 2018



Wisconsin Swimming Meet Reservation Form

Host Club Lake Forest Swim Club

Name of Meet LFSC Monster Mash

Date of Meet October 28-29, 2017

Team _____

Contact Person _____

Address _____ Phone (____) _____
(Street / P.O. Box)

(City) (State) (Zip)

EMAIL ADDRESS: _____

		Entry Fee		Swims	Total
Number of Swims	Fri A.M.	_____	x	_____	_____
	Fri P.M.	_____	x	_____	_____
	Sat A.M.	_____	x	_____	_____
	Sat P.M.	_____	x	_____	_____
	Sun AM.	_____	x	_____	_____
	Sun P.M.	_____	x	_____	_____
Meet Total		_____	x	_____	_____

Total Individual Entry Fees Submitted _____ Check # _____

Note: Relay, surcharges and time trial fees are not figured into this reservation total. Reservations in excess of actual entries are not refundable and may not be applied to relay, surcharge, or time trial fees, UNLESS OTHERWISE SPECIFIED ON HOST TEAM'S WAIVER.

For Host Club Only

Date Received _____ Amount Enclosed _____

6/23/2009