Intramural Swim Meet Registration Form

Team/Org/Individual N	Name	_
IM Chair / Captain Name Division (Greek, Org, Open)		Email Address:
		Phone Number:
Please bring completed registrat	ion form to the Stduent Recreation Center	by Tuesday, April 25th at NOON and turn in registra tion form to the Members Services Desk.
swimmers per individual race.)	Each IM Chair/Captain will recieve a email	pete in a total of four events. Greek/Organizational teams may enter only one team per relay and two confrimation regarding their registration for the Intramural Swim Meet. Please write legibly on this form, participants listed on this sheet must be registered on IMLeagues in order to compete.
		Pershing Natatorium. Doors will open at 6:30 PM with the Meet Starting at 7:00 PM. Anyone not is bete. Participants need to be checked in before their event begins.
Access to the deck and locker The announcer will use mega Starting the events:	d the shallow area is available for warm-ups rooms is ONLY for swimmers and those phone to inform participants who is up, on immers step up", "take your mark" (wait 3 starting blocks p turn allowed only on Backstroke & Frees tyone needs to quickly exit the water after e e same order listed below; Race order TBD	working the meet deck, and in the hole seconds—then a quick whistle) tyle ach heat
Event 1: 200 Medley Rela	.y	Event 5: 200 Free Style Relay
1. Backstroke		_ 1
2. Breaststroke		2
3. Butterfly		
4. Freestyle		4
Event 2: 50 Free Style		Event 6: 100 Free Style
	1	1
	2	2
Event 3: 50 Butterfly		Event 7: 100 Individual Medley
	1	
	2	2
Event 4: 50 Back Stroke		Event 8: 50 Breast Stroke
	1	1
	2	
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By listing my name on the registration form for the Intramural Swim Meet, I agree to the terms of the Waiver of Liability.

