## WISCONSIN MASTERS SWIMMING UNIVERSAL MEET ENTRY FORM

Meet Date	
Meet Location	Sec. 202.1.1 F (5) of the USMS rules requires you to submit a copy of your current registration card with each meet entry.
If a copy of your current registration card is in the box to the right you do not have to complete the personal information below, except for the phone number and E-Mail address.	Please place your current membership card here and make copies to be used when entering swimming meets.
NAME	Each meet may have different fees.
MALE FEMALE USMS NO	Please be guided by the specifics on the meet information page.
BIRTH DATEAGE	
TEAM	
HOME ADDRESS	
CITYSTATEZIP _	PHONE
E-MAIL ADDRESS  USMS rules limit a swimmer to no more the EVT#  EVT#  EVENT  SEED TIME	
FEES PER MEET INFORMATION	I PAGE:
EVENTS @ \$ea. + pool	surcharge \$= \$
I, the undersigned participant, intending to be legally bound, I otherwise informed by a physician. I acknowledge that I am awa competition) including possible permanent disability or death, a MY PARTICIPATION IN THE MASTERS SWIMMING PRO I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENO STATES MASTERS SWIMMING, INC., THE LOCAL MAST	are of all of the risks inherent in Masters Swimming (training and and agree to assume all of those risks. AS A CONDITION OF OGRAM OR ANY ACTIVITIES INCIDENT THERETO, OR LOSS OR DAMAGES, INCLUDING ALL CLAIMS CE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED ERS SWIMMING COMMITTEES, THE CLUBS, HOST R ANY INDIVIDUALS OFFICIATING AT THE MEETS OR

Signed \_\_\_\_\_\_ Date \_\_\_\_\_