# Swimmers with a Disability Entry Form

Name _____

Club _____ LSC _____

USA Swimming # _____ Age first day of the meet _____

Swimmer email address _____

Swimmer phone number _____

Name of person completing this form _____

Email address _____ Phone # _____

Please enter events below. The maximum number of events for any swimmer is six (6). Please indicate the swimmer's preference regarding seeding of their entry for each event. Please note that changing age groups may change the session & location that the swimmer swims. Changing the distance may change the date on which the swim occurs. Take these factors into consideration when selecting the seeding procedure for each event listed below. The meet staff has the final decision regarding seeding procedures.

| **Event #** | **Event Description** | **Entry Time** | **Seed with Age Group** (same age, same distance) | **Seed with Different Distance** (same age different distance) | **Seed with Comparable Time** (younger age, distance depends on entry time) |
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