

2019 SWIM CHALLENGE ENTRY FORM

NAME: _____ D.O.B: _____

PHONE #: _____ SHIRT SIZE: S M L XL XXL XXXL

EMAIL: _____

Which challenge would you like to participate in?

You can check more than one challenge. Once you complete the first 100, we will continue you in the next challenge if you are interested.

100 Mile: _____ 250 Mile: _____ 500 Mile: _____

Did you participate last year? YES ___ NO ___

If "YES" how many miles did you complete? _____

How often do you swim: _____

How did you hear about this challenge: _____

Questions or Comments you may have about the Swim Challenge:

\$20 entry payment received on: _____ By: _____
DATE STAFF SIGNATURE

Please attach receipt and put in Allison Mundy's box.