

Capital Area Swim League League 2016 "AA" Division Championship Meet

Hosted By Bobcat Swim Club

Saturday, July 22, 2017

VOLUNTEER FORM

TEAM NAME: _____

Each team must provide volunteers for each of the listed positions:

Position	1st Half	2nd Half
Stroke & Turn	2	2
Timer	2	2
Chaperone	2	2

* The Volunteer Registration Form must be completed and submitted by entry deadline of Tuesday, July 18th. Teams who do not submit a volunteer registration form will not have their entries processed. **NOTE: All volunteers must have current clearances. Each team is responsible for ensuring the volunteers provided have current clearances.**

Please remember the additional timer for 8 & under 25 meter events!

Stroke & Turn Official	1 st Half	2 nd Half
NAME: _____		NAME: _____
NAME: _____		NAME: _____

SESSION TIMERS	RELIEF TIMERS (2nd half)
NAME:	NAME:
NAME:	NAME:
NAME:	NAME:

CHAPERONES: Two adult chaperones must be provided by each team to supervise swimmers in the gymnasium and assist in locating swimmers for the seeding area.

NAME:_____

NAME:_____

NAME:_____

Starter/Referee: If you have a starter/referee who is interested in working full/part of the meet, please list their name.

NAME:_____