

SWIM MEET AVAILABILTY

Name: _____ Age: _____

**Please indicate which Swim Meets you will be able to swim.
Please let us know within 24 hours of a scheduled Meet should
your plans change.**

Can you swim: (please circle)

YES	NO	(home) Tuesday, June 1
YES	NO	(home) Tuesday, June 8
YES	NO	(away) Tuesday, June 15
YES	NO	(away) Tuesday, June 22
YES	NO	(home) Tuesday, June 29