

PINECREST SWIM TEAM
2010 Swimmer's Absence Form

FAMILY LAST NAME _____

Please submit this form with the Registration Form (or put in Team Rep's Mailbox) to inform us about upcoming swimmer's absences. We need this information to be able to seed the meets. If you, the parents, are unable to volunteer on a certain date, please fill that information on the Volunteer Form.

Please list the swimmer(s) absent (first & last name) next to each date:

DATE	EVENT	ABSENT SWIMMERS
Sat, June 19	Time Trials	_____
Sat., June 26	1 st A Meet	_____
Mon, June 28	1 st B Meet	_____
Sat, July 3	2 nd A Meet	_____
Mon, July 5	2 nd B Meet	_____
Sat, July 10	3 rd A Meet	_____
Mon, July 12	3 rd B Meet	_____
Wed, July 14	Relay Carnival	_____
Sat, July 17	4 th A Meet	_____
Mon, July 19	4 th B Meet	_____
Wed, July 21	All-Star Relays	_____
Sat, July 24	5 th A Meet	_____
Mon, July 26	5 th B Meet	_____
Sat, July 31	Divisionals	_____

Signature of Parent or Legal Guardian _____ **Date Submitted** _____