



Appendix B

Club Information Sheet

This document must be submitted to Swim Ontario at meetentries@swimontario.com or fax 416-426-7356 with entries
Entries will not be accepted until received by Swim Ontario.

Club _____

Club Mailing Address _____

City _____ **Postal Code** _____

Entries Contact Person _____

Phone Number _____ **E-mail** _____

Head Coach _____

Phone Number _____ **E-mail** _____

Coaches Attending the Meet

_____ **NCCP#** _____

_____ **NCCP#** _____

_____ **NCCP#** _____

_____ **NCCP#** _____

_____ **NCCP#** _____

_____ **NCCP#** _____

Chaperones(s) _____

Cell Phone _____

Hotel _____