

Ovens & Murray District Swimming Association

Swim Meet Booking Form

|  |  |
| --- | --- |
| School/Association: |  |
| Date of Meet: |  |
| Start Time: (competition not warm up) |  |
| Pool Location: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Timing and Starting Equipment required: |  |  |  |
|  |  |  |  |
| Officials required | | | |
| Starter: |  | Computer Operator: (Meet Manager) |  |
| Referee: |  | Judge of Stroke 1: |  |
| Judge of Stroke 2: |  | Judge of Stroke 3: |  |
| Chief Timekeeper: |  |  |  |

Note: to effectively assess the swimmers in the pool a referee and 2 JOS are needed in addition to the starter.

|  |  |
| --- | --- |
| Contact information for invoicing | |
| Contact Name: |  |
| Address: |  |
|  |  |
| Contact Phone: |  |
| Contact Email: |  |

Please return this form to entries@omdsa.org