

# Meet Calculation Form

Revised 2/16/06

2010 MCA Age Group State  
MCA  
March 12-14 2010

**Sanction # MN10W-01-13Y**

**Time Trial # MN10W-01-115Y**

**Entering Club's Name:** \_\_\_\_\_ **Club Code** \_\_\_\_\_

**Coach:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Entries Person:** \_\_\_\_\_ **Phone#** \_\_\_\_\_

### Entry Data Costs:

\_\_\_\_\_ Total Swimmers x \$2.50 = \$ \_\_\_\_\_ # of boys \_\_\_\_\_ # of girls \_\_\_\_\_

\_\_\_\_\_ Total Splashes x (\$5.00)= \$ \_\_\_\_\_ # of boys \_\_\_\_\_ # of girls \_\_\_\_\_

\_\_\_\_\_ Disk results only x \$2.00 = \$ \_\_\_\_\_

\_\_\_\_\_ Team results only x \$4.00(Hard copy) = \$ \_\_\_\_\_

\_\_\_\_\_ Full results x \$10.00 (Hard copy) = \$ \_\_\_\_\_

**Total Due = \$ \_\_\_\_\_**

**Make checks payable to: Med-City Aquatics All fees are due with your entry.**

**Mail summaries to: Name: Mike Schumacher**

**Address 4307 56 Street Lane NW Rochester, MN 55901**

**E-Mail: MCAMeetDirector@Yahoo.com**

**The undersigned team representative certifies by his/her signature that all athletes participating in this meet are currently registered athlete members of USA Swimming, Inc. The under signed further certifies that any person appearing on deck in this meet in the capacity of coach is currently a coach member of USA Swimming, Inc.**

\_\_\_\_\_

**Who should we contact if there is a problem with your entry disk?**

**Name** \_\_\_\_\_ **Phone ~ Day** \_\_\_\_\_ **Night** \_\_\_\_\_