

SPECIAL OLYMPICS COLORADO AQUATICS LEAD-UP ENTRY FORM

Region: _____ Day of Contact: _____

Team/Program: _____

Do you plan on attending the state competition?	
Yes	No

Coach Name(s): _____

Coach E-mail(s): _____

		10M Assisted Walk			15M Assisted Walk			15M Floatation			15M Unassisted Swim			15M Assisted Swim		
(Athlete Name)		:	:	.	:	:	.	:	:	.	:	:	.	:	:	.
		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
		15M Walk			15M Kick Board			25M Flotation			25M Assisted Swim			25M Unassisted Swim		
(Gender)		:	:	.	:	:	.	:	:	.	:	:	.	:	:	.
	(DOB)	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths

		10M Assisted Walk			15M Assisted Walk			15M Floatation			15M Unassisted Swim			15M Assisted Swim		
(Athlete Name)		:	:	.	:	:	.	:	:	.	:	:	.	:	:	.
		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
		15M Walk			15M Kick Board			25M Flotation			25M Assisted Swim			25M Unassisted Swim		
(Gender)		:	:	.	:	:	.	:	:	.	:	:	.	:	:	.
	(DOB)	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths

		10M Assisted Walk			15M Assisted Walk			15M Floatation			15M Unassisted Swim			15M Assisted Swim		
(Athlete Name)		:	:	.	:	:	.	:	:	.	:	:	.	:	:	.
		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
		15M Walk			15M Kick Board			25M Flotation			25M Assisted Swim			25M Unassisted Swim		
(Gender)		:	:	.	:	:	.	:	:	.	:	:	.	:	:	.
	(DOB)	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths

SCORES ARE SUBMITTED IN:	METERED TIME		YARD TIME	
	DO NOT CONVERT TIMES			