## WISCONSIN SWIMMING, INC. MEET REPORT

Instructions: The Meet Director must: 1. Complete this Meet Report. 2. Forward the Meet Report and a copy of the Meet's Final Results to Wisconsin Swimming's Administrative Chairman and to Wisconsin Swimming's Treasurer with twenty-one (21) days of the end of the Meet.

Host Club(s) Meet Name						
Meet Location	Meet Dates					
Meet Sanction #	Number of Lanes			Pool Length		
	FRIDAY		SATURDAY		SUNDAY	
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
Start Time						
Completion Time						
Age Group & Sex						
# Swimmers Entered						
# Individual Events						
# Individual Entries						
# Relay Entries						
# Time Trials						
Attached to the Mee	t Report are	e the follow	ing lists/inf	Cormation:		
<ol> <li>List of participating Clu</li> <li>List of the LSC's of the</li> <li>List of United States Sw</li> <li>If competition occurred attached like that provided</li> </ol>	swimmers comprimming Official on day(s) other t	eting as "unatta s by session wi	ached." th each officials	s first and last na	me and his/her L	
Prepared ByPlease Print				Date		
Signature				Telephone(	)	
Email address						