



**GULF Swimming  
Swimmer Assignment  
Form**



Name of Meet: \_\_\_\_\_

Date: \_\_\_\_\_ City: \_\_\_\_\_

Name of Swimmer(s):

_____	_____
_____	_____
_____	_____

Name of Swimmer's Team: \_\_\_\_\_

I, \_\_\_\_\_, agree to act as coach for the  
(Print your name)  
above named swimmer(s) during the pre-meet practice, warm-up and the  
competition.

\_\_\_\_\_  
Coach's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coach's Team Name

\_\_\_\_\_  
Coach's Cell Phone Number