



YMCA Sanctioned Championship Meet
Declaration Form

Meet Name: Great Lakes Zone Championship
Meet Date(s): March 21-23, 2014
Meet Location: The Ohio State University

Participating YMCA: _____
YMCA Address: _____

Head Coach: _____
Coaches Attending: _____

Meet Referee: James DePietro & Pamela Birnbrich

Entry Contact Name: _____
E-Mail Address: _____
Phone: _____

I attest that all swimmers representing the YMCA above are full privilege members of the YMCA. I also attest that all coaches representing the YMCA above hold current certifications in CPR, First Aid, Coaches Safety Training and Principles of YMCA Competitive Swimming and Diving.

Name of Head Coach

Signature of Head Coach

Name of YMCA Executive Director or Designee

Signature of Executive Director or Designee