

USMS TOP TEN PATCH ORDER FORM

Rec'd _____
 Ver. _____
 Mailed _____
 Ck _____

INDIVIDUAL TOP TEN:

Name of Swimmer: _____ Age Group: _____

Address to Send patch: _____

Contact info. (to be used only if necessary to clarify order): Phone or email: _____

Circle appropriate category: MEN WOMEN

YEAR of Patch	List Stroke Segment	COURSE	DISTANCE	RANK	COST
Note: Patches indicate only the year of the swim, not the course. Most patches are available back to 1979.	FREE, BACK, BREAST, FLY or IM	SCY, SCM, or LCM	50, 100, 200, 400, 500, 800, 1000, or 1500/1650	in Top Ten	One patch and one segment = \$7.50. <i>Additional</i> stroke segments are \$1.50 each.
Total Patches:	Total Segments:				Total Cost:

RELAY TOP TEN:

Circle as appropriate: MEN WOMEN MIXED FREESTYLE MEDLEY

RELAY TEAM ABBREVIATION: _____ LMSC: _____

NAME of RELAY MEMBER Requesting the Top Ten Patch & Relay Segment: _____

Address to Send patch(es): _____

YEAR of Patch	AGE GROUP of RELAY	COURSE	DISTANCE	RANK	COST
Note: Patches indicate only the year of the swim, not the course. Most patches are available back to 1979.		SCY, SCM, or LCM	200, 400, or 800 EVENT Free or Medley	in Top Ten	One patch and one relay segment = \$7.50. <i>Additional</i> relay segments are \$1.50 each.
Total Patches:	Total Segments:				Total Cost:

Please enclose a check payable to: Lake Erie LMSC
and mail to: Top Ten Patch Order, c/o Judi Norton, 4269 Mallard Cove, Avon, OH 44011-3225