

WINTER FREEZE MANUAL MAIL-IN ENTRY FORM:

Name: _____

DOB: ____/____/____ Sex: ____ USMS # _____

Team (if applicable): _____

Mailing Address: _____

Phone: _____

E-mail: _____

Events:

Event #	Event Name	Seed Time	Entry Fee

Note: All relay entries will be registered and paid for at the entry table the day of the meet.

Total # Entries: ____ (cannot exceed 6 Individual)

____ # Entries x \$5.00 \$ _____

____ # Entries x \$3.00 \$ _____

Electronic Timing Fee: \$ 5.00

TOTAL FEES: \$ _____

*Payment to be made to: Phoenixville YMCA.

Mail entries to: Tez Seiberlich
Winter Freeze Masters Meet
Phoenixville YMCA
400 E. Pothouse Road
Phoenixville, PA 19460