



Swimmer _____ Age _____ Club _____

1. Please consider sponsoring this swimmer to help raise money for the club's swimming activities which include local and national programs.
2. 95% of the funds collected are retained by this swimmer's team or school to help finance its swimming program, while 5% is sent back to USA Swimming to defray expenses and to support other grass roots programming.
3. Each swimmer is limited to a MAXIMUM OF ONE CONTINUOUS TWO-HOUR PERIOD in the water or a MAXIMUM OF 200 LENGTHS OF THE POOL, whichever comes first. This distance represents approximately three miles.
4. The capabilities of each swimmer is determined by the coaching staff and/or the participating club. The coaches are responsible for the supervision of the swimmers.
5. A portion of your donation to USA Swimming is tax deductible. Check with your tax advisor for tax implications.

6. PLEASE MAKE ALL CHECKS PAYABLE TO THE SWIM TEAM, NOT USA SWIMMING

Signed _____ Date _____
Coach or Club Representative

Sponsor's Name (please print)	Address	Signature	Pledge per Length	Lengths Completed	Total Amount	Paid
						Date
Total this page			\$		\$	

This is to certify that _____ has completed _____ lengths

Date _____ Coach _____ signature _____

