**New Jersey Pool Managers Association**

**ENTRY FORM 20**22 **NJPMA SWIM CHAMPIONSHIPS**

**Pool:**  **Phone**:

**Coach**:  **Phone**:

**Name of Swim Team:**

**Team Participants in the NJPMA Championship Week (Each swimmer MUST be noted)**

| **Swimmer** | **Age\*** | **DOB** | **Event #** | **Time** | **Event #** | **Time** | **Event #** | **Time** |
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**\*Please enter the swimmers age as of 5/31/**22