

OHIO SWIMMING, INC.
CHAMPIONSHIP MEET FINAL REPORT

.....

This report shall be completed by the Meet Director and mailed, along with one copy of the final results, to David Beck, O.S.I. Age Group Chairperson, 2372 Whitlock Pl. Dayton, OH 45420, within 14 days of the last day of the Championship Swim meet.

.....

This FINAL REPORT concerns the Championship Swim Meet as indicated: (Regional, JO, Senior)

Championship Meet	Commission (Regional)	Short Course	Long Course

Date of Meet: _____ Sanction No. _____

Date of Report: _____ Meet Host Club: _____

Location of Meet: _____

Meet Director: _____ Meet Referee: _____

.....

1) Meet Statistics per session:

	Boy Swims	Girl Swims	Boy Swimmers	Girl Swimmers	Session Start Time	Session Finish Time
Thursday AM						
Thursday PM						
Friday AM						
Friday PM						
Saturday AM						
Saturday PM						
Sunday AM						
Sunday PM						
Totals					XXXX	XXXX

Total number of O.S.I. State qualifying times achieved:
(To be completed by Regional Championship Meets hosts)

“AA” Qualifying times: Boys _____ Girls _____

2) Financial Report:

Income from Entry Fees: _____ Other Income: _____

Income from Time Trials: _____ Expenses: _____

Profit (Loss) From Meet: _____

3) On behalf of the Meet Host, I hereby certify that all requirements of Ohio Swimming, Inc. regarding a Championship Meet have been satisfied, and hereby request the appropriate postage subsidy as provided for by Ohio Swimming, Inc. Policy and Procedures.

SIGNATURE OF MEET DIRECTOR: _____

PRINT NAME: _____

PHONE NUMBER: _____