



2010 CPAL BILL SCHMIDT MEMORIAL ALL STAR Meet
Hosted by Cumberland Valley Aquatic Club & Collegiate Aquatics
Sunday, February 28, 2010

Coaches and Volunteers Sheet

Submit completed form to paclarkfamily@comcast.net by **Sat. February 13, 2010.**

Team Name: _____ **Abbreviation:** _____

Daytime phone _____

Evening phone _____

Contact : Name and Address of the person(s) to receive ALL communication

Head Coach _____ Head Coach Email: _____

Team Contact _____ Team Contact Email: _____

Contact Cell # _____

COACHES ATTENDING: Only Coaches listed below will have credentials to get pool deck access

Name _____

Name _____

Name _____

Name _____

Timers (Name & Phone Number): Two per session from each division 5A and 4A with at least two qualifying swimmers. One per session from division 3A, 2A and 1A teams with at least one qualifying swimmer.

AM _____

AM _____

PM _____

PM _____

Stroke and Turn Officials/Finish Judges (Name & Phone Number):

AM S&T _____ AM FJ _____

PM S&T _____ PM FJ _____

Colorado/Meet Manager Assistants (Name & Phone Number):

AM _____

PM _____

Only the names listed on this sheet will be given FREE Admission, if used.

Name of person completing this sheet: _____

Final Assignments will be posted on the CPAL website.

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