Coach Certification Form

Return with Meet Results to:
Midwestern Swimming, Inc.
1429 N. Webster Ave.
Hastings, NE 68901

Name of Meet: _____ Location: _____

Date: _____

All **Coaches and their Assistant Coaches** must sign this form in order to be on deck at any MW swim meet.

COACHES - I do hereby certify that I am a currently registered **coach member** of USA Swimming,

ASSISTANT COACHES - I do hereby certify that I am a currently registered **athlete or non-athlete member** of USA Swimming and am here under the **direct supervision** of a currently registered **coach member** of USA Swimming.

Name (Please Print)	*Signature*	*CLUB*	*LSC*	*Assistant (Y or N)*

Revised March 10, 2021

Meet Director: _____