

# **Arizona Swimming**

## **2024 Arizona Zone Team**

**SWIMMER APPLICATION**

**DEADLINE: June 21, 2024**

I \_\_\_\_\_ (insert name) am officially applying to participate in the Arizona Swimming Western Age Group Zone Team. Swimmers are responsible for arranging travel to, from, and during the meet with their parents. Athletes will not travel with coaches or in other groups, but only with their parent/parents to and from the meet.

If I am selected to attend, I understand that I will be representing Arizona Swimming, not my club, at this competition. I agree to participate in all relays and/or individual events I am selected to participate in by the selected Arizona Swimming Western Zone Team Coach/Coaches. Only Arizona Swimming Zone Team Apparel will be worn at the meet. **NO club apparel.**

Please complete and submit by regular mail or hand deliver (there is a mail slot on the office door available 24/7) to:

Arizona Swimming  
301 Bethany Home Dr Suite A227  
Phoenix AZ 85012

Application deadline: Must be received in the Arizona Swimming office by June 21, 2024, at 2PM. Applicants must include a \$100 deposit check with this application, made payable to Arizona Swimming. Checks will NOT be cashed until team selection has been made.

Applications without payment will **not** be accepted or returned. Refunds to those not selected for the team will be processed **AFTER** any possibility of being chosen as an alternate via the shredding of the submitted deposit check.

The required deposit will assist with expenses such as team jacket, backpack, t shirt/cap, coach expense, and meet entry. Travel to and from the meet and all travel expenses will be the responsibility of the athlete's parents

### **Arizona Zone Team**

**DATE:** Aug 7, 2024 and end of August 10, 2024

**LOCATION:** Boise, Idaho

**Meet Flier also posted on [WesternZoneSwimming.org](http://WesternZoneSwimming.org)**

**Swimmers will be notified by July 1, 2024**

**TEAM TRAVEL SWIMMER APPLICATION**  
**(Please Print)**

USA Swimming registered

First name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_  
Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Gender: M F

USA Swimming Member I.D. \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Athlete T-Shirt Size \_\_\_\_\_

Your home e-mail address \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_  
*(Western Zone Team correspondence will occur via e-mail)* Phone: Home (\_\_\_\_) \_\_\_\_\_  
Cell (\_\_\_\_) \_\_\_\_\_

Coach \_\_\_\_\_ Club affiliation \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Address (if different from above) \_\_\_\_\_

Parent/Guardian Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Parent/Guardian email \_\_\_\_\_

I, \_\_\_\_\_, am the Parent/Guardian for \_\_\_\_\_. I authorize \_\_\_\_\_, to apply for participation in Arizona Swimming's Western Zone Team. I understand that Arizona Swimming will **not** arrange for, or pay, travel costs (including airfare, housing, food, etc.) to or from the meet located in Boise, Idaho and that such expenses (travel, housing, food, etc.) are the Swimmer/Parent/Guardian's responsibility.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

AZ Swimming "A" qualifying times and events.

Qualifying Event	Bonus Event	Swimmer Time

Is this application for an athlete with a disability: Yes No (Circle one)

**Times listed from January 3, 2023 - July 4 2024. We are limited to a total of 80 athletes, (12 of each gender in each age group). If more than the allotted numbers of athletes in each gender/age group apply, the times for each event will be ranked with a numerical score. The top scoring athletes will be chosen to attend.**