APPENDIX 2: SENIOR RECOGNITION FORM

We would like to recognize all high school seniors who will be attending the meet. Please include their names and number of years of YMCA swimming. **Please email completed form to FultonDistrictAds@gmail.com no later than December 15th.**

Team Name: _____ **Head Coach:** _____

Senior Swimmer Name	# of Years in YMCA Swimming	Post High School Plans